

PSYCHD

The experience of being a non-native English speaker working as a practitioner in London

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The experience of being a non-native English speaker working as a practitioner in London

by

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Abstract

Counselling is a process which provides understanding and support to clients, aiming at the improvement of their psychological well-being. It involves both verbal and non-verbal communication, but it is essentially based on therapist and client talking to each other. Cross-cultural issues, migration and communication across different languages are part of societies in big cities like London and although cultural issues have been largely explored in the literature, very little attention has been paid to language differences and how the impact on the therapeutic process. The focus of this exploratory study was to look closely at the experience of conducting therapy in a language that is not your first language through an in-depth analysis of the experience of being a non-native English speaking practitioner in London. In order to better understand the language impact on counselling, 10 practitioners (Counselling Psychologists or qualified counsellors) were interviewed, a qualitative method of analysis (Interpretative Phenomenological Analysis) was used to investigate how these non-native English speakers understand and make sense of their life experience as clinical practitioners. Participants were drawn from nine different nationalities who spoke a total of thirteen languages, excluding English. The analysis of the interviews supports current research in the field. The first master theme that emerged from participants' experiences, 'more than words' captures the experience that aspects of language beyond words are important in the therapeutic scenario. The second, 'the relationship', comprises the importance of the therapeutic alliance. The third, 'cultural link', represents the difficult-to-separate union between language and culture. The last one, 'special resource' includes the main benefits of being non-native English speaker therapists working in London. With these four master themes, this study concludes that the relationship between client and practitioner goes beyond language and in fact, it can be used as a tool to overcome these language-related challenges.

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1-Introduction

*“.....Trying to learn to use words, and every attempt
Is a wholly new start, and a different kind of failure
Because one has only learnt to get the better of words
For the thing one no longer has to say, or the way in which
One is no longer disposed to say it. And so each venture
Is a new beginning, a raid on the inarticulate
With shabby equipment always deteriorating
In the general mess of imprecision of feeling,
Undisciplined squads of emotion.”*

T.S. Eliot (1940)

In order to provide the background to this study, I will first present my personal motivations for researching this topic and why this specific subject needed attention. Following that, I will offer an overview of the role of practitioners and their relationships with their clients, and highlight the importance of language in this context. Finally, I will illustrate why the geographical location where participants practiced was so relevant for this research and how working in London impacted on their experience.

1.1- Personal statement

I grew up with the value that learning another language, especially English, could be very important to my future, that it would lead to advantages amongst other professionals even in my native country, Brazil, where we speak Brazilian Portuguese. Despite the costs of studying a foreign language at that time, I dedicated about eight years of my life to learning English and Spanish because I thought it would be worthwhile. To my surprise, circumstances gave me the opportunity to live in London. My first thought was that there I would be completely immersed in the

English language. What I did not imagine was the diversity of people and languages I would encounter there. This had the effect of further enhancing my interest in language to the point that I also started learning Italian and French, which turned out to be much more fun and easier than I had originally anticipated. Moreover, through my practice as a counsellor in London, more doors were opened to me. I was offered placements in organizations with a great reputation because of my ability to offer counselling in different languages. This allowed me the exciting possibility of practicing these languages, which in turn allowed me to feel deeply in tune with them.

I will never forget my first English speaking client (who was in fact, also my first native English speaking client) and the questions that surrounded my experience. In particular, her fragility made me worry that I could be there for her or that she would feel sufficiently understood. Thankfully, my fears were unfounded for one day she said to me: *"I feel so much better every day when I leave the sessions. It has been very helpful coming here. Thank you for your help."* Even now, as I remember it, I can still recall a weight falling off my shoulders, a sense of relief and my confidence started to build. Following that client, came my first Italian, Spanish and Portuguese speaking clients. All these experiences were unique, and not simply because of the language difference. However, my curiosity about language, my awareness of it continued increasing. Through my work with a multicultural clientele, my perception of the potential impact of language differences in the relationship between client and practitioner has continued to develop.

Language not only encompasses grammatical forms, but also covers the whole gamut of interpersonal interactions. So much so, that learning other languages also means learning new ways of speaking, new patterns of communication, and new modes of social interaction. Thus, one could say that trying to become proficient in

another language should also include learning about the culture that uses that language and being interested in people unlike yourself. Each language carries its own identity, particularities, and a whole world of conceptual distinctions that define human relations. The outer world (actions, reality) and inner world (thoughts, feelings, beliefs, emotions) associated with one language can be completely different when translating, from the inner and outer world associated with another language. Through learning different languages, I came to realise that words used to express everyday emotions in one language, simply were not able to capture the depth of the meaning of these emotions in another. Although I developed enough fluency to think in different languages, I would often find myself struggling to translate a feeling from one language to another. Thus, gradually I became increasingly aware of the distinctiveness of each language and culture and the issues with translating emotions or feelings into another language.

1.2- Language and Psychotherapy

More than a century ago, prior to the existence of the psychoanalysis and long before the development of Counselling Psychology, the concept of language and its effect on relationships was raised. The case of Anna O (Freud and Breuer, 1895) has become recognized, discussed and studied in depth by anyone in the field of psychology. It is described in the literature that in a certain stage of her treatment, Anna O, known as a polyglot (fluent in German, Hebrew, Yiddish, French, Italian and English), started unaware speaking a variety of languages, including English to her carers.

Why has Anna O suddenly started speaking other languages during her treatment? What was the real meaning hidden behind simply switching to another

language? Did that affected her diagnosis and how did it impacted on her treatment? Although historical, the case of Anna O continues to raise questions that are pertinent to contemporary practice.

Counselling Psychology and psychotherapy are mediated through language, this is the basis of the communication between therapist and client. While non-verbal communication is very useful in the therapeutic relationship between client and therapist, Counselling Psychology and psychotherapy sessions rely on clients talking, verbalizing their issues and telling their stories. The Counselling Psychologist or therapist verbally intervenes whenever appropriate in order to help the client to reflect and think more thoroughly. Within this context, language is the vehicle, the main tool of communication and interaction between the client and the practitioner, however its nuances and on how it is used and interpreted have received very little attention until recently.

This research aims to investigate some of the issues involved in being a practitioner working in a language that is not your first language. It aims to elucidate a rarely explored aspect of cross-cultural counselling, through focusing on the aspects of language differences and their impact on therapist-client relationship. The initial introduction and literature review will highlight the relevance of this research together with how and why the presenting topic was chosen, as well as how the criteria for selecting the research participants were determined. This section provides a brief explanation regarding the importance of the relationship between client and practitioner for a positive therapeutic outcome and the importance of the language they speak for a mutual understanding.

According Costa (2010), language is used to communicate ideas, needs, and feelings and to make meaning of experiences. This makes language an essential part of our existence and survival within a society. Costa (2014) refers to the unique

“naïve picture of the world” (p.20) that each language carries. She explores the individual characteristics that stand out for people depending on the language they are speaking. In addition she gives an opportunity for the reader to reflect about how the language we speak impact on our personality and on the way we feel, behave and perceive the world and ourselves. Connolly (2002) proposes that in order to understand and speak a second language it is necessary to recognise the sounds and rhythms of this language rather than only knowing the words and the grammar.

1.3- What is involved in being a practitioner?

The role of a practitioner is to provide a safe, reliable and comfortable space for clients to explore their issues and feelings through communicating them to a therapist. In this sense, therapy heavily relies on verbal abilities (Clauss, 1998). The aim of a therapeutic relationship is to promote change and growth for oneself and others, whilst emphasizing an awareness of oneself, others and the relationship as a whole (Jordan et al., 2004). As Corey (2009) says, the professional relationships with clients should exist for the client’s benefit alone. The person-centred literature presents main core conditions such as positive regard, congruence and empathy which are considered responsible for promoting constructive counselling relationships.

The field of Counselling Psychology relies on the way practitioners relate to clients; which is considered to be the key contribution to the outcome of therapy. Research into the nature of the therapeutic relationship shows that it is estimated to account for as much as 30 per cent of the variance in outcomes, with relational qualities appearing to be as important in non-relationally-oriented therapies (e.g. CBT) as they are in relationally-oriented ones (e.g. psychodynamic) (Cooper, 2008).

Most theoretical definitions of the therapeutic relationship have three common factors: the collaborative nature of the relationship, the affective bond between therapist and client, and the client and practitioner's ability to agree on treatment goals and tasks (Haugh & Paul, 2008). A relationship depends on communicating, and the main way that a relationship between a client and a practitioner occurs is through language.

This relational model is supported by empirical evidence for the importance of the therapeutic relationship in order to achieve a positive outcome of therapy. There is developmental evidence that all humans possess innate capabilities to interact and to develop throughout their lifetime through their relationships with others (Khan, 1991) and that psychological difficulties arise from early pathological relationships (e.g. Bowlby 1988, Fonagy 2001, Wallin 2007). This relational approach is acknowledged by many schools of contemporary psychotherapy and there has been an increased interest in the subject among professionals and researchers (Loewenthal and Samuels, 2014). Relational psychotherapy draws upon a vast number of approaches such as humanistic, person-centred, psychodynamic and even CBT therapy. Relational psychoanalysis (see Mills, 2005) challenges the traditional, formal, fixed ideas of psychoanalysis. With the relational focus, an interest on the subjective field was born and allowed therapy to go beyond interpretation.

Therefore, the psychotherapeutic alliance or the encounter and interaction between client and therapist, regardless of the orientation, is not only the most important part of the therapeutic process [like many theorists advocate (Green, 2010; Haugh & Paul, 2008; Kahn, 1991)], but it is also a central feature to brief psychotherapy (Mander 2001). Clarkson (2003) talked about the relationship being one of the most important elements in any change. Holmes (1999) also advocated

that the “key to change is the relationship itself” (p.35). Within this context, language comes to be an essential aspect of relationships. Clearly it is important for practitioners to understand clients fully and it is important for clients to feel fully understood by practitioners in order for the therapy to be effective. Then, it seems like that mutual understanding depends on large part on verbal communication (language).

Relational practitioners regard the therapeutic relationship, referred to by them as a helping relationship, as not only necessary but sufficient for constructive changes to occur in clients (Nelson-Jones, 2006). Similarly, Kahn (1997) stated that, according to Roger’s approach, therapists are not required to have any special intellectual or professional knowledge but rather to have the skill of building a strong bond with a client which is deemed essential for a positive therapeutic outcome. But how can one build a relationship without communicating with the other? Verbal communication is the main vehicle through which communication occurs and the language spoken by the therapist can either help to create a therapeutic relationship or hinder it.

Language is extremely important because it is one way people can share their world views and beliefs (Ali, 2004). It is argued that people who speak more than one language have different representations of self that are arranged accordingly to each specific language (Perez, 1996). It is important to increase awareness about the subtleties that could be missed in therapy when language differences are not taken into account. Mohavedi (1996) offered an opportunity for practitioners to question whether what is expressed in a second language actually means what is intended in the mother tongue. He wondered whether it is possible to: ‘retrieve the linguistically structured experiences from one language into another?’ (Mohavedi, 1996, p.847). Akhtar (2006) says that despite the differences in language not being necessarily an

impediment to the therapeutic process, when practicing in English, non-native English speaker practitioners could easily miss figures of speech, nuances of meanings and various connotations of words .

1.4- Language diversity in London

For those who live in London, language and diversity are part of daily life. English is the official and dominant language in the United Kingdom and in London. As Usmani (1999) observed, it is also the most spoken language in the whole world. He also reports that by now, non-native English speakers would have outnumbered the amount of people who English is first language. Accents from everywhere in the world, mix together forming almost a symphony of sounds on the streets of London. In such a place, people are used to non-native English speaker and are even used to not understanding them.

But what happens when understanding becomes crucial and when people who need to be understood are so vulnerable? What happens in the room when the therapist is a non-native English speaker? Can the relationship between client and practitioner somehow impacted or shaped by language difficulties? It is these questions that I sought to answer when I proposed to do this study. Speaking a second language raises various issues worth extensive reflection such as subtle differences on the meaning of words that are linked with cultural diversity, and how these subtleties impact on communicating with the other, including clients expressing feelings and emotions to therapists, as well as therapist truly understanding clients. Therefore, part of the aim of this research is to identify and discuss these issues.

A word might be translatable into many different languages but its meaning may vary from one place to the next. Practitioners talk and hear about feelings daily in their work. Simple words and name of objects might easily translate to other languages, but feelings, expressions, metaphors and even slang words can be challenging to communicate in a second language. As suggested by Szekacs-Weisz and Ward (2004), although one may find a translation for a word in many different languages, they might actually have completely different meanings because words in one's first language tend to be embedded in early feelings and experiences.

For example, in my first language, Brazilian Portuguese, the word 'saudade' is used to denote a feeling that I was never able to accurately translate into English or, actually, into any of the other languages I speak. Although 'saudade' can be loosely translated as 'missing someone or something', it is an extremely intense feeling similar to melancholia. Perhaps, I could say that the translation of 'saudade' in English only gets closer to its real meaning in the expression 'being homesick'. Another good example of untranslatable words, or 'half translatable' words, from a non-native English speaker point of view, is the English word 'friend'. The elasticity of the concept of this word in English is enormous and can encompass female and male relationship whilst, at the same time, can also be employed to describe a vast range of other relationships, both intimate and superficial. The reality is that, whilst language is the vehicle of expression, for each encoded word, concepts are embodied which are not always obviously decipherable.

One of the challenges faced by practitioners who do not speak the same first language as their client, is related to concerns about speaking primarily consisting of the fear of making errors. The question is: in a profession that requires we fully understand our clients, what is the role of language and how can misunderstandings impact the therapeutic process? In large cities such as London, with a population of

more than 8 million inhabitants, there are lots of immigrants and therefore a huge mixture of cultures. For instance, about 700 different languages are spoken daily in London and 300 languages are spoken by schoolchildren in this city which contributes for London to be one of the most ethnically diverse cities in the world. In fact, in some suburbs of London, English is now a second language.

In July 2012, the Office of National Statistics reported an increase in the number of immigrants in Greater London to nearly one million. Immigration in the traditional sense continues to occur as more and more individuals feel compelled to take extraordinary steps to uproot themselves from their familiar cultural and linguistic groups and emigrate to different cultural and linguistic communities (Javier, 2007). People from everywhere in the world from all continents, leave their country of origin every day and move to England, especially to its capital London. Their age, sex, ethnicity, marital status and the reason to migrate from their native soil varies, however it is usually associated with the search for a better and safer environment or more meaningful and productive life conditions.

While 37% of London's population is from outside the UK, including 24.5% born outside of Europe, the use of 'good' Standard English is predominantly the vehicle by which communication occurs. In fact, there have been attempts to recruit and train bilingual practitioners for specific communities. Hopkins and Reed (2008) have focused on the ethical aspect of language and accent, of what is said and how it is said in the therapeutic room. Of special interest to them was the possibility of non-understood words or expressions that might distance the practitioner and client. Already in 1974, Vontress identified that language issues could cause communication problems on an implicit level and pointed to them as something that may impede counselling effectiveness.

Being a non-native English speaking practitioner working in a city with such a large concentration of immigrants could equally help or hinder professional practice. It helps the professional practice because living in London may also mean a relatively high possibility of finding practitioners and clients from all over the globe. Kissil et al. (2013) conducted a literature review exploring how immigration and acculturation impacts on the experience of immigrant therapists working in the U.S. They highlighted that “speaking a primary language that is different from English adds another level of complexity to the feeling of otherness” (p.142).

Kissil et al. (2013) indicated the possibility of non-native English speaking practitioners missing figures of speech, nuances of meaning and variations in the connotations of certain words. However, they also suggest that the potential need to clarify and explain certain words in the room is actually a useful means to deepen the level of the conversation between practitioner and client.

Such a multicultural and cosmopolitan city like London has a lot to offer in terms of diversity, culture and language, and its impact on the therapeutic sphere must be taken into consideration and made relevant. The large number of non-native English speaker practitioners working in London is acknowledged by Connell, Macaskie and Nolan (2016). Given the potential importance of language in the psychotherapeutic process and given the large number of non-native English practitioners living in London, it is really important to understand the experience of these practitioners. and this makes this attempt to look closely at language so valid and important for the Counselling Psychology field. Therefore, it is intended that the findings and observations from this research will stimulate further debate on this topic.

Although this study was restricted to the city of London, it is likely that the areas explored and the conclusions reached could be extended to other multi-national cities around the world such as New York, Sydney, Toronto, etc., the same way research

conducted in other countries regarding language differences in the therapeutic room also contributed a lot for this research.

2-Literature Review

In order to establish the current state of knowledge about the issues involved in working as a psychotherapy practitioner in a language that is not your first language, a literature was undertaken. Using PsycARTICLES, a search was conducted for articles containing the key words: *language, therapy, psychotherapy, bilingual, linguistic differences, immigrant, and acculturation*. The literature review will first consider the relationship between language and culture, and will consider the problems in analysing language as something that is separate from culture. The review then argues that language is immersed in cultural issues, carries its culture, and it is very difficult to separate them both.

Following that, the role of language in the therapeutic relationship was focused on and finally a closer look at language barriers was undertaken, highlighting the current increase of interest into looking at language within the context of therapy. Most of the articles related to the subject of this present study are either case studies or review articles only. In addition, most of the literature was published in the USA, by American authors. This indicates the importance of carrying a research within other geographical areas, such as London.

2.1- The difficult-to-separate link between language and culture

Cultural and language issues are acknowledged as communication and relationship barriers in various professions such as the medical one. Jain and Krieger (2011) identified different accents and the use of slang words as language issues faced in the communication with patients. They researched twelve international physicians completing their internal training in a respected hospital located in Ohio,

USA, and highlighted the importance of understanding language barriers in the interaction between clinician and patient in order to enable the development of strategies to overcome these barriers. They explored the difficulties participants experienced communicating with their patients, focusing on language, culture and affect and also focused on various strategies participants used in order to make their communication with their patients more effective and meaningful. These strategies included non-verbal communication, repeating the information given and altering their speaking styles.

Language is a form of social differentiation and when talking about its possible barriers, or advantages and disadvantages of being a non-native English speaking practitioner, it is really important to take into account the degree of fluency in the language that should be ‘good enough’ for practitioners to understand their clients’ needs and feelings. It is extremely important for the therapist to evaluate the degree of language dominance as well as the potential for non-congruence of the client's language systems (Marcos, 1976).

Several studies have shown that the ability to understand vocally-expressed emotions in speech is partly independent of linguistic ability and involves universal principles; however, every language is capable of great beauty and power of expression, each one in its own way. Kaplanski (1998) used projective technique to test eight individuals based on the “language independence phenomenon” which posits that first and second language are obtained, sustained and utilized separately. In her unpublished dissertation, bilingual individuals who acquired first and second languages, maintained and utilized separately, result in different levels and types of affective expression in each language. In a literature review and summary, Marcos (1976) supported the view that the existence of an emotional detachment effect

caused by the deflection of attention and the undermining of the effectiveness of the therapy toward the more demanding second language.

Imberti (2007) wrote about his experience as an immigrant and explored other immigrants' experiences, arguing that when an individual switches language, their identities and worldview get transformed (p.71). It may be difficult to separate language issues from cultural issues in a therapeutic setting, as language is a reflection of the society and culture where it is developed. Practitioners working in a second language are more likely to be working with different cultures and during the last two decades counselling in a multicultural context has been on the increase. Ali (2004) spotted a gap in systemic therapy literature about bilingualism and used social constructivism to identify potential challenges for practitioners. He stated that "language is not only a medium of a culture; it constitutes it as well" (p.342).

Cross-cultural or trans-cultural psychology is defined as the scientific study of variations in human behaviour, taking into account the different ways in which behaviour is influenced by cultural context. In a cross-cultural or trans-cultural setting, practitioners need to select and adjust their speech sensitively to their clients' needs (D'Ardenne & Mahtani, 1999). A review of existing literature suggests that a lot of research has been done in England regarding cultural differences in the counselling room, but very little exploring the issue of language differences within this field. Issues of cultural diversity, race, and ethnicity have been extensively addressed in contemporary psychological literature but the dimension of the language experience of immigrants has received minimal attention (Imberti, 2007).

For many decades studies have been carried out to investigate the barriers in cross-cultural counselling. Results of studies about practitioners' views of cross-cultural counselling revealed that there is a greater emphasis on barriers than on benefits in cross-cultural counselling (Fitzgerald & O'Leary, 1990). Culturally skilled

and sensitive practitioners might be more able to recognize the limits of their competencies and expertise, and also to establish the necessary and sufficient conditions of a helping relationship with many clients who come from cultural backgrounds different from their own. Some studies strongly advocate that all forms of counselling are cross-cultural and that cultural issues need to be seen as central to cross-cultural counselling (Sue, Arredondo & McDavis, 1992).

Alonso (2009), in his research about bilingual clinicians, reported that, despite the large number of studies done around cross-cultural and multicultural counselling, the issue of native language usage in treatment, particularly by the treating psychotherapist, has received little empirical attention. Her unpublished doctoral dissertation focused on the Latin population in America and used IPA to investigate thirteen participants. Her findings supported the theory she called “a linguistic based dual sense of self”. What she meant by this was that language directly impacts on people’s sense of self and that bilingual people see themselves differently depending on the language they are speaking. She reported that conducting therapy in client’s first language fostered a positive therapeutic relationship. In addition, she described the possibility of switching languages as a positive tool in the therapeutic room.

D’Ardenne & Mahtani (1999) wrote about trans-cultural counselling. According to them, practitioners and clients who are bilingual have an additional resource which enriches trans-cultural counselling and the difficulties of moving from one given language to another can generate insights. Stratton (1998) points out that aspects and peculiarities of a language can only be fully acknowledged and understood by recognizing the cultural beliefs that it embodies.

The broad subject area of this programme of research concerns the importance of language and culture, in particular its relevance for practitioners working in London. Sciarra and Ponterotto (1991), on their case illustration focused on Hispanic

population in the USA and the role of culture in bilingual family, stated that culturally sensitive practitioners and trainees must be aware of appropriate uses of primary and secondary languages to verbalize important therapeutic material (Sciarra & Ponterotto, 1991). There are many studies suggesting that counselling training programs should provide opportunities for counseling trainees to specialize in multicultural counselling.

Connell, Macaskie and Nolan (2016) talked about white European practitioners working in their second language in the UK and used IPA to analyse the mutual awareness of the language difference in the therapeutic room. Their research developed the concept of the third language, which is common language constructed in the relationship between client and practitioner seeking a better way to communicate, relate and connect, by being aware of the sameness and the difference in the room. In another similar study, Georgiadou (2014) used IPA with eleven non-native English speaker counseling trainees to examine about the advantage of practitioners working in a different language. According to him, counseling in a second language enable practitioners to have a better capacity to deal with anxiety and misunderstandings as it is easier for them not to take things for granted.

According to Laungani (2004) in his paper on multicultural counselling, it is important to understand the “diverse emotive and cognitive meanings which each of us assign to words” (p.197). He argued that the words, the choice of words, and what they mean to clients and practitioners is very significant in the therapeutic relationship. There is a vast literature available regarding the use of the language in the communication process as well as material regarding cross-cultural barriers in the counselling process. The literature specifically related to language barriers in the counselling process is largely explored in USA based on research with Hispanic clients and family.

2.2- The role of language in the therapeutic relationship

Although there is a huge number of immigrants from everywhere in the world living in London, the issue around language barriers in the counselling process, as mentioned above, is tackled broadly in studies focused on cross-cultural issues. Most of the studies in this area are focused on the client's perceptions instead of the practitioner's point of view. One might argue that in the counselling process patterns of communication are generally directed from the client to the practitioner, meaning that the client's ability to communicate might be more important than the practitioner's. However, it is essential to be aware of the clinician's limitations and difficulties in listening and responding to a client in order to prevent misunderstandings, as language may interfere with the integration of the affect and the experiences being verbalized, distorting the practitioner–client communication.

Some relational therapists might argue that the primary aim in the treatment of the client should be the creation of a therapeutic relationship and the quality of this relationship will lie mostly on the verbal and non-verbal communication between practitioner and client. According to Asay and Lambert (1999), the therapeutic relationship accounts for approximately thirty per cent of the variance in therapeutic outcomes. Theorists advocate that the development and movement of this relationship becomes the central challenge of the therapy and obviously language is one of the most important tools used in this process. The fact that people's emotional intensity diminishes when they are speaking or switching into their second language and increases when they are speaking or switching into their mother tongue has been described as the "detachment effect hypothesis" by Pizarro (1995). In his study which was conducted in USA, he argued that this detachment effect might have an

impact on the relationship between practitioner and client. However, his attempt to support this idea did not succeed and his study failed to sustain his theory.

Thus, there is a need for research that examines how a practitioners' ability to speak the client's language when it is not their first language might play a role in the therapeutic relationship. This research intends to focus on linguistic barriers and difficulties, if any, that the practitioner might face in truly understanding and staying with the client when they do not know the real meaning or the emotional significance of a word, such as the use of colloquial language or slang, for example. I intend to investigate the practitioner's perceptions about any impact that language might have and how this might be helpful or unhelpful in the therapy process. I intend to analyze individual's experience of the therapeutic alliance and their ability to understand and speak the client's mother tongue.

2.3- Language barriers in psychotherapy

I am aware that language related to counselling is a popular subject at this moment since cultural issues have been largely explored in the field during the last couple of years. An unpublished dissertation was developed by Rosenblum (2011) intending to investigate the role of language in therapy and how bilingual or multilingual practitioners experience their work with bilingual or multilingual clients. In this study, using grounded-theory, the author gives a special attention to the process of language switching in American counselling rooms. Despite some similarities with the aims of my research, they most differ in terms of methodology and participant group.

A study conducted in United Kingdom in 2004 (Bowker & Richards) explored the practitioners' experiences of working in English with bilingual clients. This generic qualitative study involved only psychodynamic and psychoanalytical practitioners and they were first language English speakers. Although authors of this article argue that their aim was to focus on the individual's experiences, it seems that their research questions were already addressing and assuming issues related to this experience. This study used phenomenology and hermeneutics to manually analyze the data collected which showed issues related to language proficiency, power in the therapeutic relationship, and the practitioner's reaction to the client's accent. The study might be helpful on enhancing our understanding of language barriers in the counselling room; however, I am more interested in the experience of non-English practitioners. Given the methods Bowker and Richards (2004) used to analyse the data, which they only described as analysed manually, it is questionable to what extent that study follows phenomenological and hermeneutic principles.

According to a qualitative study carried out by Verdinelli and Biever (2009), bilingual practitioners have reported differences in the way they conduct therapy, depending on which language is been used. The researchers recruited 8 participants and used a phenomenological analysis based on a modified Stevick-Colaizzi-Keen approach to analyse the data collected. Based on the results of this study, they advocate that translating therapists' own thoughts during the session, using technical vocabulary and understanding the variations of the language can be particularly challenging for practitioners whose first language and culture are different from those of the clients.

Further linguo-cultural barriers lead to underutilization of services, diagnostic errors and poor treatment. Kitron (1991) analysed clinical vignettes and discussed the unique characteristics of therapy conducted in the native language of the client that is

not the native language of the therapist. According to him, the choice of a practitioner who speaks the client's language but does not have total command of the language has various implications. Not only might be useful and necessary to provide services in the language used by clients, but it might also be essential to examine and possibly change counsellor's attitudes and behaviour in order to provide efficient counselling services. As D'Ardenne & Mahtani (1999) argued, if clients are counselled in their first language they gain easier access to important and familiar cultural experiences.

Bilingual speakers frequently report experiencing greater emotional resonance in their first language compared to their second (Caldwell-Harris & Aycicegi-Dinn, 2009). Mohavedi (1996) also raised the issue of the difference communicating in a first and in a second language and the possible incompatibility of describing objects, emotions or experiences in a second language when compared to doing the same in one's mother tongue. Indeed, he speculated whether this transition from mother tongue to second language was actually even possible. It is important to analyze to what degree the therapist thinks that his emotional resonance influences his relationship with his clients and the therapeutic outcomes. Alessi (2001) specifically looked into the experience of speaking the Spanish language well and used Empirical Phenomenological Analysis to analyse five participants. In her unpublished study, she contributed to the understanding of therapeutic interactions for bilingual therapists, as well as to a better description of the relations between language and countertransference, and language and the therapeutic stance.

Moreover, Jimenez (2004) discussed communication and interpretation aspects of psychoanalysis that occur when the analyst and client have different native languages and also suggested that the analyst working in a foreign language moves between 'the confusion of tongues' and the 'gift of tongues'. Bilingual/multilingual

practitioners might have a competitive advantage in their careers due to their foreign language skills and cultural knowledge. Santiago-Rivera e Altarriba (2002) in a literature review also explored the role of language in therapy for bilingual clients and stated that its understanding is fundamental for effective treatment regardless of theoretical orientation.

The impact of language in the relationship between client and practitioner was long ago addressed in a study where Owen (1991) hypothesized that the way the counsellor and client perceive each other's words has an effect on their relationship. The paper is a case study analysis that advocates that the practitioner's words contribute to the client making sense of his/her experiences; therefore, these words determine the explicit ground rules of the counselling. In conclusion, the author states that research indicates what is and is not effective practice, and counselling theories need to be turned into effective counselling relations.

A recent study conducted by Costa & Dewaele (2012) used mixed methods to investigate beliefs, attitudes and practices of 101 monolingual and multilingual therapists in their relationship with multilingual clients. The authors argued that the role of language in therapy has attracted very little attention, although practitioners are becoming more aware of the psychotherapeutic implication for someone who gives or receives therapy in a second language. The research aimed to focus as closely as possible on language issues and it shows that the way in which experiences and emotional reactions are encoded becomes more complex for people who speak more than one language.

In a study that combined grounded theory and a discursive approach to investigate how individuals construct their experience of living life in different languages and what impact this has in the relationship between therapist and client, Burck (2004) argued that "different languages speak us differently" (p.10) and the

way that individuals experience themselves varies in each language they speak. She used Grounded Theory to analyse twenty-four participants and her research showed that using different languages has different effects and meanings for the therapeutic relationship. She also stated that using a second language has its advantages and disadvantages for therapy.

An investigation using grounded theory to examine the impact on the therapeutic relationship when clients' and practitioners' first language are different, showed that therapists who do not share the same mother tongue of the client, reported some level of anxiety about communication (Stevens and Holland, 2008). Since the literature indicates that communication and language in and of itself might have an effect in counselling, it is important to focus on the aspects of the language and the experience of working as a practitioner in a second language rather than focusing on cross-cultural and immigration issues. An intensified focus on the therapist's professional experience working in a different country and culture from their own will provide important insights into the nature of the therapeutic process.

A recent study was published in the UK (Nguyen, 2014), focusing on the identification aspects of therapist-client relationship, highlighting features related with the early mother-infant relationship. The author concentrated on the monolingual/bilingual aspect of practitioners and clients and did not elucidate what she considered monolingual or bilingual. This study investigated nine practitioners working in the UK but did not mention exactly where and did not take into consideration the broad clientele available in other languages in multicultural cities like London, which is very different from the clientele from small towns and countryside. Also, there is no information regarding the exclusion criteria utilized in this research but it is mentioned that on average, participants have been practicing for a total of eleven years.

This aspect differs from the aim of the present research to understand the experience of non-native English speakers working in London as practitioners for less than ten years. On average participants on this present study were practicing for only six years. Despite of the author claiming to have used what she called “adapted IPA thematic approach”, her methodology is confusing and does not follow the steps suggested by any IPA book or published article. Some themes and sub-themes the author identified in her research were accounts from an average of two participants, which is less than thirty per cent of her sample, contradicting an IPA method in which themes should be recurrent in at least sixty per cent of the sample. Therefore, I question the validity and reliability of this study. With IPA we need to be careful with how to use the data because everything that comes up on interviews is interesting however, not everything is useful.

2.4- Conclusion

Despite culture and language being very much intertwined, the literature review showed that an effort to focus on language issues is needed, once cultural influences and aspects of client-practitioner relationship have already received a lot attention, especially in the USA where there are a large number of Spanish speaking people living there. In the UK, more specifically in London, there are a large number of immigrants among the current population. That reinforces the call for more research about the role language plays in the relationship between a practitioner and a client and also what it means for them to have therapy conducted in a second language.

Foster (1996) maintained that clients were generally able to communicate their experiences, feelings and emotions in a second language so long as they are proficient speakers at that language. Despite being generally able to communicate,

there are nuances in meanings that open the door for misunderstandings. In addition, I would argue for a much more complex dynamic in the therapeutic relationship as regards language than this very simplistic point of view. In order to achieve an in-depth understanding of the experience of practitioners working in a second language in the United Kingdom, this research will use IPA to examine the experience of non-native English practitioners working in London.

Further, my objective is to identify the main issues related to language that non-native English speaking practitioners face when working with clients in English. This research aims to explore whether certain groups of clients are more challenging than others regarding the kind of English they speak, e.g., young males or females using slang.

3-Methodology

Section A: The Research Approach

The question the research intends to explore is: “What is it like to experience being a non-native English speaker working as a therapist in London?” By exploring this question this research aims to investigate how participants make sense of their own experience whilst also acknowledging the influence that I, the researcher, will have on the collection and analysis of the data. This chapter focuses on the methodology used in this study. It is divided into two sections: the Research Approach, highlighting the methodological stance and procedure to be adopted in the study, and the Method, discussing the specific research techniques used.

As stated by Smith, Flowers and Larkin (2009), the reason for selecting a specific research methodology must be that it is consistent with the epistemological position of the research question. A qualitative approach was elected because the aim of this study was idiographic, exploratory and inductive, where the questions applied were “how” and “what”, rather than “why”. Rafalin (2010) also defended that qualitative methodologies are more compatible with the Counselling Psychology researches. Accordingly, a consideration of different research approaches will also follow.

3.1- Why Qualitative Research?

Qualitative research was conducted by many psychologists before the World War II. However qualitative research was not recognized as a scientific method and only became accepted and respected in the field of psychology in the late 20th

century. Traditionally, quantitative researches are concerned with counting the amount of a phenomenon, or some aspect of it, whereas qualitative researches analyse a phenomenon in depth, usually focusing on people's lived experience of that phenomenon. Qualitative research allows researchers to investigate participants' subjective views, theories and assumptions, to connect directly with their lived experiences and to examine their meaning-making processes. Qualitative methods such as phenomenology are very popular within the Counselling Psychology field because they provide a means for carrying out an in-depth exploration of people's behaviour and experiences.

3.2- Why Phenomenology?

Phenomenology is a very broad area that refers to both philosophical movement and a variety of research methods. Initially Phenomenology was the name that the philosophical movement started by Edmund Husserl (1859-1938) and followed by Martin Heidegger (1889-1976) received. Nowadays it is basically recognised as a study of the meanings and nature of an experience, and at the same time, a philosophy and a family of research methods concerned with exploring and understanding human experience (Langdrige, 2007). According to Wertz (2005), phenomenology is a philosophy which relies on the concreteness of person-world relations and takes into account lived experiences, including all the individual aspects which might link to it.

Finlay (2011) argues that phenomenology offers valuable knowledge to therapists as it focuses on their concerns with the subjectivity of each client. She also advocates that it "deepens our understanding of therapy practice and processes helping us in both our personal and professional development" (p.10).

Phenomenology researchers attempt to focus closely on the phenomenon which is the lived experience being investigated. Finlay (2011) also described that phenomenology researchers striving to do justice to and apprehending the fascination of people's everyday experiences, instead of categorizing behaviours and generating theories. I chose to use it because it is very suited to Counselling Psychology and it will enable me to find meaning within other people's lived experience (Cohen, 1986, p.14).

While phenomenology endeavours to understand the essence of everyday experience (Finlay, 2011), Hermeneutics, a theory and guide for interpretation (Smith, 1996), delivers context by situating the research question into cultural and historical perspectives. Hermeneutics guarantees that researchers are driven towards interpretation rather than description.

3.3- Why Interpretative Phenomenological Research (IPA)?

IPA is a qualitative research approach frequently employed in Counselling Psychology as it aims towards an uncovering of how individuals understand a particular experience and the meanings they ascribe to it. IPA takes the ontological position that individuals are seen as being the 'meaning makers' of their experiences, and that researchers can use their interpretative abilities to group key features of participants meanings. As such, the importance of the researcher engaging in this process of co-construction of knowledge (Smith at al., 2009) is acknowledged. This research intends to highlight the experiences of practitioners with language and how it affects the therapeutic relationship with the client using IPA as a method of analysis of the data. I was interested in engaging in a process of trying to see other professionals' experiences differently, without assuming that it can be similar or

different from my own. IPA is not used to evaluate anything, but to explore subjective views.

Considering my research question, and based on my interest in how people experience things individually and how it can be best addressed, I selected Interpretative Phenomenological Analysis as the method of analysis because it encourages the researcher to be interpretative rather than descriptive. This methodology is more congruent with my personal interest of how people make sense of their experience of being a non-native English speaker working as a therapist in London as it provides an in-depth and detailed research of an experience of the self, which is not easily quantifiable. Taking in to account that the idea of this research relates to my own experience as well, IPA will also allow me to reflect on what I brought with me to the research and what changed throughout the investigative process.

IPA uses both phenomenological and hermeneutic (interpretative) methods. It is actually considered a double hermeneutic (Shinebourne, 2011), where the researcher aims to make sense of the participant making sense of their experience. Trying to be clearer, ‘double hermeneutics’ (Smith and Osborn (2008) involves researcher making sense of participants’ experience while, at the same time, participants are trying to make sense of their own experience. That is the main reason why, between different qualitative approaches, I decided to use an Interpretative Phenomenological Analysis (IPA) whose purpose is to “explore in detail how participants are making sense of their personal and social world” (Smith & Osborn, 2008, p. 51). It is focused on exploring the meaning of participant’s experiences, that is to say, it represents the researchers’ interpretation of the participants interpretation of their own experience.

IPA is a process which explores each participant's unique experience and at the same time provides the opportunity to generate detailed information about a group of participants (Larkin et al., 2006). IPA is also a phenomenological approach which is well suited to existential questions (Eatough & Smith, 2008). Its purpose is, after an in-depth analysis, to arrive cautiously at repeated themes, rather than making premature generalizations about a large group (Smith & Osborn, 2008; Smith et al., 2009). IPA draws on a subjective experience and detailed reports of personal experience for the individual. It is in accordance with the aims of this research which is dedicated to a detailed inspection of how people make sense of the experiences in their lives (Smith et al., 2009).

3.3.1- Inductive methodology

IPA adopts inductive procedures in the sense that it searches for patterns across the experiences of each participant, presenting shared themes, but also "pointing to the particular way in which these themes play out for individuals" (Smith, 2011). Inductive methodology is a form of research that takes a series of individual cases and seeks to identify connections and phenomenon that have been observed in all of the selected cases. In other words, it aims to obtain theoretical explanations based on a series of particular cases. Inductive methodology could be said to be nomothetic in the sense that it seeks to come up with generalisations across cases.

On the other hand, working inductively requires a careful consideration of individual cases, it requires an ideographic component. If on one hand inductive methodology can represent a risky leap from a collection of single facts to a general truth as it generates a general rule from a set of observations, on the other hand, it

guarantees the unique subjectivity of each individual's experiences. Smith believes that being inductive is a central feature of IPA. In IPA, each participant's account of their experience is considered on its own terms through an inductive process.

3.3.2- Idiographic approach

Another main influence upon IPA is the idiographic approach. According to Shinebourne & Smith (2010), idiographic and nomothetic approaches are two distinct methods that can be used to understand social life. An ideographic approach, as opposed to nomothetic approach, represents a method that focuses on the particular instead of generalizing individual results to the global population. An idiographic approach seeks to study individual cases for the sake of understanding their specificity or uniqueness, before any general statement can be produced (Pietkiewicz & Smith, 2012). This is in contrast to a nomothetic approach (nomos – Greek for law) which seeks to establish general rules (or theories, or laws). A nomothetic research usually starts with a theory, rather than developing it inductively.

In short, idiographic approaches aim to focus on the uniqueness of the individual, instead of developing theories, generated from individual results, that can be generalized for the whole population. However, at the same time that it emphasizes the individual, it also offers an opportunity to reflect on the importance of the single case study (Smith et al., 2009). Idiography and its commitment to the specific enable the researcher to uncover individual convergences and divergences and draw on meticulous generalisations of the potential richness of a particular phenomenon.

The whole idea of the idiographic approach relates a lot with the principles of IPA and with its focus on the subjective accounts of personal experience. In that sense, IPA can be considered an idiographic methodology that allows the researcher to concentrate on a particular experience of particular participants. According to Smith (2011), IPA has theoretical roots in idiography, therefore IPA is considered “idiographic in its commitment to analyse each case in a corpus in detail” (p.10), prior to the move to more general claims. IPA is idiographic in nature in its stated concern with particular or unique events (Shinebourne, 2011), rather the universal (Smith et al., 1995). By stating that the analysis presented on this research follows an idiographic approach, it is concluded that the researcher understood each participant individually, rather than simply pushing them into boxes.

3.3.3 - Realism and Critical Realism

IPA follows a realist position where researchers take at a high value participant's own sense of reality. Realism is a philosophical position that acknowledges the real existence of social and physical objects. In other words, realism is an approach to humanity which focuses on the possibility of gaining objective knowledge about the real world. Realism asserts that the things we are studying in social research have some prior existence and would continue to exist even if our knowledge of them was limited. Realism can also be seen as a set of suppositions that can be tested in form of empirical research. From a realist perspective, all objects exist in themselves.

Contemporary Realism is an approach that aims to assure that the phenomenon being researched already exists and will continue existing regardless the limitations of the research (Olsen, 2010). For realists, truth is not a product of

research; in fact it is independent of it. For realists, there is a knowable world out there which contains participant's experiences. Given its realists commitments and given its acknowledgement that our knowledge of the objective world is inherently limited, the position taken by IPA has much in common with the position of Critical Realism proposed by Bhaskar (1978).

“Critical realism is a series of philosophical positions on a range of matters including ontology, causation, structure, persons, and forms of explanation” (Archer et al. 2016). Critical realism is also a philosophical position but that goes beyond realism and that in terms of philosophical view it is somewhere between realism and relativism where researchers aim to be more pragmatic, accepting that there is a real world that can be observable despite of being, at the same time, socially constructed (Finlay & Evans, 2009). Relativism is the position where truth is purely relative to who is speaking. In that sense, IPA does not follow relativism.

Critical realism also aims to “identify those deeper lying mechanisms which are taken to generate empirical phenomena” (Alveson & Skolberg, 2009, p.40). In not pursuing the existence of such generative mechanisms, IPA, through being a critical form of realism, falls short of Critical Realism. Therefore, IPA adopts a form of scientific realism where researchers come with a good description of participant's experiences, not merely a systematic account, but an account that other researchers can also look at. Both critical realism and IPA take realist positions because they value that researchers have different perceptions and experience of the objects that exist. At the same time that IPA is oriented to an objective world, it also acknowledges that people have different understandings of that world. IPA adopts a realist approach to knowledge, considering people's narrative to be products of cognition. IPA researchers take a realist position in the sense that they aim to deeply

understand how certain phenomenon is experienced by participants and produce a valid explanatory knowledge.

3.3.4- Reflexivity and bracketing

Reflexivity in IPA is a fundamental resource for the analysis, involving the researcher's capacity to consider and draw on how their assumptions and presuppositions are affecting the analysis of the data. Briefly, reflexivity is a dynamic process where researchers mirror the kind of work therapists do (Finlay & Evans, 2009), which means the researcher engages on a process of reflection. This process allows researchers to reflect about how their selves are impacting on the research process and results. In IPA, researchers' own perspectives are presented in reflexivity, illuminating the analysis (Willig, 2001). The aim of reflexivity is to promote awareness about the relational encounter between researcher and participants and how this encounter influenced the data and the analysis.

The process of bracketing, or epoché as it is also called, is the process of putting on one side our own assumptions and perceptions about the phenomenon being studied. As such, bracketing and being reflexive are distinct practices; however they both involve aiming for the 'neutrality' of the researcher. For Smith et al (2009), the process of bracketing in IPA is important because it helps researchers to separate themselves from the data being analysed. In this process, the researcher aims to fully enter the world of the participants always maintaining an open presence. Bracketing can be seen as "an attempt to suspend presuppositions" (Finlay & Evans, 2009, p.95) or the attempt "to see through fresh eyes, to understand through embracing new modes of being" (Finlay, 2008, p.29).

IPA considers bracketing a very important part of the research process. The process of bracketing helps IPA researchers to concentrate on understanding the experience being studied in its own terms. Many contemporary phenomenologists can advocate for the impossibility of researchers separating themselves from the research, therefore the process of bracketing can be used together with the process of reflexivity by IPA researchers. Bracketing allows the IPA researcher to grasp the experience that they are researching; also allowing the reviewer to represent what is going on accurately. If in one hand the researcher uses bracketing to analyse the participant's experience, on the other hand, reflexivity is used to analyse researcher's own experience of analysing the data.

According to Smith et al. (2009), researcher's reflexivity is a very important part of IPA. Finlay (2009) advocates that IPA researchers must engage in a critical and reflective process of evaluation of how researcher's own assumptions and presuppositions impact on researcher's interpretation of participant's experiences. Because it depends on researcher's interpretation, IPA researches necessitates researcher reflexivity throughout, therefore researcher's reflexivity is a particularly important aspect of IPA as a research method.

3.3.5- Interpretation

Another essential aspect of IPA is interpretation as IPA is heavily influenced by hermeneutics, the theory of interpretation. By Oxford Dictionary, interpretation is "the action of explaining the meaning of something". Interpretation is the act of interpreting, explaining and elucidating what something means. Interpretation is a dynamic process that requires some interplay between the interpreter and the object. It is illuminating to consider interpretation in a context outside psychological

research, for example the historical organization, Interpretation of Canada (1976) has an interesting way of defining it. According to this organization, interpretation is "a communication process, designed to reveal meanings and relationships of our cultural and natural heritage, through involvement with objects, artefacts, landscapes and sites." This definition offers a good insight regarding the work of a practitioner in interpreting what a client says.

In order to identify the aims of this study it was firstly identified that it fell into the interpretivist tradition rather than the positivist tradition which looks for a single universal true knowledge (Finlay & Evans, 2009). The interpretivist position derives from a much more humble point of view where there is a door opened for interpretation and exploration of different meanings. Interpretivists believe in a multifaceted truth, that can be seen and interpreted from different perspectives.

I therefore, acknowledge here that, despite of my effort to be as neutral as possible and to generate research findings based on an unbiased analysis of the data collected, I am aware that I could never be fully objective. Although I had absolutely no intentions to base my research in my own experience, I would be ingenuous to presume I could entirely disregard it in order to produce a complete uncontaminated empirical exploration. My assumptions and beliefs about therapy are part of who I am and as a Counselling Psychologist in training, I ground my therapeutic practice in the client-therapist relationship and in the uniqueness of each client and each therapist.

I agree with Holmes' (2010) statement that each client will have a different therapeutic experience with a different practitioner, and equally, each practitioner will have the experience of a different therapeutic relationship with each client. My aspiration is that, as advocated by Finlay and Evans (2009), I can be vigilant to the extent of my presence and the unconscious processes, while, at the same time, I

observe and reflect about the participant's experience and the similarities between their experience and mine. Therefore instead of trying to do a perfect research or to do it in the right way, my commitment here is to clearly describe my own research trajectory and how I developed into getting to my findings.

IPA focuses on the interpretation of meaning. Researchers using qualitative methods take into consideration that "meanings are fluid, subjective to interpretation and negotiated within particular social contexts" (Finlay & Evans, 2009). Therefore, interpretation in IPA is dynamic and iterative and IPA states that interpretation must be generated clearly from a phenomenological point of view (Smith et al., 2009). In IPA "the relationship between the interpreter and the object of interpretation" is not only recognized (Smith, 2007, p.5), but emphasized as an important part of the process of analysis. "The research is the product of interpretation." (Willig, 2008). It aims for researchers to go as deeply as they can possibly go in terms of interpretation, which is determinant for a good quality work.

IPA argues that interpretation "is a form of amplification or illumination of meaning. In IPA, the researcher needs to engage with the data and creatively, reflectively and critically interpret it. IPA sees people as self-interpreting beings (Taylor, 1985). Researchers keep open to different layers of meaning and various possible interpretations, moving between a variety ways of being interpretive. (Finlay & Evans, 2009). When writing an IPA research, "the narrative account may engage several levels of interpretation, from low-level interpretation of data to a highly detailed, interpretative and theoretical level, which may generate new insights" (Pietkiewicz & Smith, 2012).

As Reid, Flowers and Larkin (2005) say, IPA is the exploration of lived experience coupled with a subjective and reflective process of interpretation. An IPA research is heavily influenced by the researcher's engagement with and interpretation

of the participant's account. Therefore IPA is both phenomenological and interpretive. According to Willig (2008), observations of participant's accounts, made during IPA analysis "are necessarily the product of interpretation." There are different levels of interpretation in the analysis of my data. Each phase of the analysis unfolds one level of interpretation. My final analysis required me to look back to the data many times as each time that was done, one more level of interpretation was uncovered.

Despite interpretation being subjective and the results of an IPA research being dependent upon my interpretations of participant's experience, the interpretations I present on the analysis of this research can be clearly understood by other people. According to Smith (2005, 2011), although IPA is an interpretative process, the researcher can arrive at a disciplined understanding of participant's experiences that other researchers can also evaluate. Smith (2005) also advocated that the validation of the themes emerged on an IPA study is possible by a co-researcher. This way, researchers can present an analysis which is not merely their subjective view of the participant's experience, but it is grounded in something deeper.

3.4- Other Qualitative Methods Considered

Descriptive Phenomenology, Hermeneutic Phenomenology, Grounded Theory (GT), Template Analysis (TA), Narrative Analysis (NA) and Discourse Analysis (DA) were also considered as other options in this qualitative research. Descriptive Phenomenology does not include an interpretative element (Langdrige, 2007) while IPA uses hermeneutics to understand and interpret how participants make sense of their experience whereas descriptive. Hermeneutic Phenomenology is

very similar to IPA, however Linda Finlay (2011) described IPA as a “more structured version of Hermeneutic Phenomenology” (p.90). IPA focuses more on the individual’s sense-making and has a more structured method/set of analytic steps than Hermeneutic Phenomenology.

The reason why IPA was chosen over GT was because GT, as stated by Willig (2001), represents a more sociological than psychological approach, while IPA focuses more on the personal experience of a smaller sample. GT is an inductive approach (McLeod, 2003) and requires a constant comparative analysis and a more structured interview schedule. The interview in GT is more researchers led and the sample is heterogeneous while in IPA we use a more homogeneous sample. Also, GT might require a larger sample to confirm the explanations of broad concepts. TA was discarded because it comes out with a list of themes that might be present instead of starting with predetermined list of themes, which from my point of view might generalize similarities of people’s experience instead of focusing on their individual experience. Also, Some theorists might argue that TA is very descriptive and usually for a larger number of participants, not reaching an in depth analysis.

IPA was chosen over NA because NA focuses on one way only of giving meaning which is, people including metaphors and discourses. For that reason, I believe that IPA is more open to the subjective individual experience and it can still consider a narrative of how participants make sense of their experience but using a broader focus (Smith et al. 2009). DA was also excluded for being more concentrated on language as regards the way it constructs social reality rather than concerned with sense making and cognitions. DA concentrates in looking at the role of language in people’s experience.

3.5- Ethical Approval

A research for this project was submitted for ethics consideration under the reference PSYC 13/ 108 in the Department of Psychology and approval was granted under the procedures of the University of Roehampton's Ethics Committee on 6th of February 2014. A copy of ethical approval can be found in appendix 1.

3.6- Participation Criteria

IPA aims to learn in depth accounts of individuals' experiences therefore it requires small sample sizes. Although researches that use IPA usually benefits from concentrated focus on small number of participants and a general rule specify 4 to 10 interviews at a Doctorate level, my aim was to recruit 10 to 12 counselling psychologists or qualified counsellors (BACP or UKCP), age 30-60, who work with psychological and emotional difficulties. Their first language must be other than English; however they must be fluent in English and have been working in the United Kingdom as counsellors for more than a year. They had a minimum of sixty hours of English speaking clients. The approach used by each counsellor on their work was not determinate as a criteria but it will be taken into account in the analysis.

Exclusion criteria: Counsellors who work with clients with learning disabilities or severe problems such as psychosis or personality disorders because in their interactions language and communication is often dominated, not by cultural or linguistic factors, but by the condition itself. Practitioners who have been working in UK for more than 8 years will also be excluded as they are likely to be completely

inserted in the local culture and the language barriers, if any, tend to be minimized after so many years.

3.7- Recruitment of Participants

The participant group was recruited from the London area as it is the focus of this study. There was no specific language or cultural group targeted. Despite of the study being advertised on notice boards of Roehampton University and notice boards of a few centres in London which offer counselling in other languages, bilingual or multilingual counsellors were mainly found through websites of psychology or counselling societies/organizations such as BACP, UKCP or BPS. On these websites, practitioners state in their profile which language they offer therapy in, which made it easier for me to target possible participants. I contacted all practitioners who offered counselling in another language on the BACP website by e-mail, with my research advert attached to it. Interested candidates were asked to contact me via the email or telephone number provided on the advert. Recruitment advert can be seen on appendix 2. It took me longer than I predicted it would take me to recruit participants. Although there are lots of foreign professionals working in London, many of them end up working for international organizations and therefore they do not need to go to the trouble of joining professional bodies.

3.8- Data Collection

In order to fulfil the aims of the study to examine participants' experience in depth and detail, the qualitative research was conducted using semi-structured, one-

to-one interviews. Questions were open ended, exploratory and focused on the reflection of each participant's process and meanings of their experience of being non-native English speakers working in London. The focus of the interview was on participant's perceptions about language and how language differences impact on the relationship between client and therapist. This was contemplated to be consistent with qualitative research (Forrester, 2010; Willig, 2001; Langdridge, 2007) and also the most pertinent way for acquiring an exhausted description of the participant's experiences. Interviews were taped in two different electronic devices in order to avoid any mishap.

3.9- Ethical Considerations

This study was conducted under the British Psychological Society (BPS) Code of Ethics and Conduct and carried out with integrity, responsibility and professionalism, with a special attention on identifying and minimising risks to any participant (Heppner et al., 1998). Participants were treated with respect, as well as the data collected. Participants' wellbeing was thoroughly thought about when establishing clear contracts and obtaining informed consent (see an example of consent form in appendix 3) prior to the research interview. The informed consent was signed by all participants and a debriefing form (see appendix 4) was given to each participant in order to emphasise to participants that I and my supervisors could be contacted should any further questions or points of concern arise. The debriefing form also included information about places where participants could find psychological/therapeutic support should they feel the need to do so.

Following Elmes et al.'s (1995) discussions of ethical procedures, participants were not placed under any pressure to take part and were also informed about their right to withdraw the research at any time during the research process. In accordance with the British Psychological Society (BPS, 2009) Code of Ethics and Conduct, I limited the disclosure of the data collected to that which is consistent with professional purposes, such as interview transcripts and recordings made available to examiners and academic supervisor only. All participants were clearly informed about data protection applied procedures and any identifiable detail was altered throughout the transcription of the tapes in order for anonymity to be maintained. Participants were informed that all data collected will be stored for a year after completion of this research and securely destroyed after this period of time. All signed consent forms were stored in a safe locked drawer and will not be found attached to the hard copies of this work. All electronic documents related to this research were password protected at all times and only accessible to me.

Given the subject, I did not predict a profound or significant emotional impact of my research on the participants. However, I anticipated that, based on participant's on-going relationships with professional supervisors and personal therapists, any emotional impact would be well supported and it was highly unlikely that the research interview would raise unmanageable difficulties. In addition to that, I, the researcher and also a Counselling Psychologist in training relied on my professional skills to ensure that any issue raised would be appropriately explored.

Section B: Method

Having clarified the theoretical and practical orientations of IPA, this section will describe the specific research techniques employed. These include details of the participants' recruitment, interview and data analysis.

3.10- Recruitment Process

Following my first contact, I have received only two responses which one practitioner did not fit my criteria. I kept sending emails and looking for more possible participants. Whenever I had a response, I contacted the practitioner again and then asked and found out whether he/she met the criteria to be a participant in my research. Following a positive outcome, I sent an email to each of them, describing the main goals of the research and how they would be expected to contribute. Once they have agreed and in order to facilitate the process, interviews were arranged accordingly to practitioners' availability and each of them suggested a convenient place to meet. After having arranged ten interviews to do I stopped recruiting participants. I kept the contact of two practitioners that were interested in taking part in my research just in case someone I recruited decided to drop out, which luckily did not happen. Five out of the ten interviews happened in the participants' private practice. The other interviews, three of them happened in a quiet Cafe, one in a library and the other one in an empty classroom of the University.

3.11- The Sample

A total of ten participants took part in the study. Their demographic data can be found on the following table. Coincidentally, all of them were female. Their ages varied between 34 and 56. Participants demographics presented on the table is provided for interest only, as there was no assumption, nor later indication, that gender, age or professional therapeutic orientation had a significant impact upon

emergent themes. Equality, as these factors presumably may have impacted their lived experiences, there was no assumption that they did not.

Table 1. Information on Participants

NAME *	AGE	NATIONALITY	FIRST LANGUAGE	OTHER LANGUAGES (in addition to English)	NUMBER OF YEARS PRACTISING AS A COUNSELLOR IN ENGLISH	NUMBER OF YEARS SPEAKING ENGLISH	THERAPEUTIC ORIENTATION
Anne	43	German	German	Italian	4	20+	Integrative
Bia	33	Brazilian	Brazilian Portuguese	Spanish, French	7	14+	Existential/ Integrative
Kelly	51	Greek	Greek	-----	8	16+	Cognitive Analytic
Katerina	34	Russian	Russian	-----	3	14+	Integrative
Rif	44	Indian	Hindi	Bengali	5	38+	Integrative
Gersende	63	French	French	Italian	5	40+	Integrative
Sylvia	69	Polish	Polish	Russian, Ukrainian, French, Italian	10	50+	Psychodynamic
Mariane	32	German	German	Spanish	3	15+	Gestalt
Ayda	55	Swiss	French	Swiss German and German	10	40+	Psychoanalytic/ Psychodynamic
Giulia	47	Italian	Italian	Portuguese, French, Greek, Spanish	6	28+	Humanistic

** All names have been changed to protect participants' identities.*

3.12- The Interviews

The semi-structured interview schedule aimed to cover three broad areas which are: 1) a brief history of the therapist's experience and perceptions of his work with native English speakers; 2) a brief history of his experience when working in English with non-native English speakers; 3) a brief history of his experience with

working with clients who have the same mother tongue as his. Questions about the therapists' views of the advantages and disadvantages, if any, of working with those populations, were asked. Interview schedule consisted of a few clear and easy to understand open questions which were memorized before its conduction (see appendix 5). The interview were led by the participant, not the researcher, allowing pre-determined questions to be changed and omitted, depending on how participants set the parameters of the topic.

3.13- Data Analysis

As acknowledged in the first section of this chapter, the data were analyzed using Interpretative Phenomenological analysis as described in Smith et al. (2009). An exploratory, discovery oriented approach, based on IPA principles was adopted (Watkins & Schneider, 1991), where the researcher was open to participant's accounts of their experiences as practitioners. In qualitative research, the researcher is the primary instrument of data collection and analysis (Glasser & Strauss, 1967).

Interviews were transcribed verbatim and read through many times, allowing the researcher to familiarize with and stay very close to data, which might inspire him to new interpretations of the well-known phenomena (Kvale, 2007). This way, the researcher will start entering participant's world through an active engagement with the data. It did not take long for me to realise during the process of transcribing the interviews, that although the recordings captured all the words said, it did not captured the actual sense of what was being experienced (Willig, 2001). IPA was designed to deeply explore the participant's own experience or perceptions of their world (Smith, 2004); however this method also recognizes that, in making sense of

another's world, the researcher inevitably engages in a "process of interpretative activity" (Smith & Osborn, 2008).

I was aware that knowledge that has been acquired cannot be unlearned; therefore I chose not to start transcribing any interview before finishing interviewing all my participants. In this way, I sought to avoid previously collected data having an impact on new data. The process of transcribing each research interview opens up and embeds the researcher's experience of that particular interview, and because of that, I chose to transcribe all the interviews myself. By listening to the audio recordings, I re-experienced what was like to be with each participant and it allowed me to get closer to the data. The process of transcribing the research interviews revealed a first layer of the data.

In order to provide the reader with a clear idea of the analysis process, I describe below the steps undertaken and each phase of my analysis, in accordance with Smith et al. (2009). Each step below was done for all participants before moving to the next step.

Step 1: Reading and re-reading the transcripts.

Here all the transcripts were read a few times while, simultaneously to listening to the tapes. At this point, I only focused on ensuring the accuracy of the transcript and of each word transcribed, including sounds and reactions of participants. Doing that, I allowed myself to get a deeper sense of my experience as a researcher and to be deeply immersed in the data collected. Transcripts were then formatted in order to facilitate the next steps of the analysis; line numbers were included and researcher's comments were highlighted in red colour.

Step 2: Developing a table into which emerging themes and exploratory comments would be added

Initially, I just printed the transcript of the interview and started making notes on it by hand, while I was reading it. However, I realized that my papers were getting very messy which could slow down the process of moving to the next steps of my analysis. Therefore, I designed a table in order to organize the analysis process. The table was consisted of four columns. In the middle is located the original transcript, on the left margin there is a column for the correspondent line number for each comment and another column for the emerging themes. On the right hand side of the original transcript, a column for my exploratory comments was inserted. A brief example of this analysis' table is illustrated bellow and a complete example of a participant's table can be seen in appendix 6.

Table 2: Table created for data analysis

Emergent themes:	Line:	Original transcript where:	Exploratory Comments:
Initial emergent themes where it was used strikethrough text for all overlapping or repetitive ones	Refers to the line correspondent in the original transcript	<p>-Red sentences refers to interviewer's comments</p> <p>-[...] refers to editorial elision where non-relevant material has been eliminated</p> <p>-... refers to a pause in the participant's account</p> <p>-Bold is used to highlight words or extracts that I found key to understand the participant's experience</p>	<p>Descriptive in pink</p> <p>Linguistic in blue</p> <p>Conceptual in green</p>

Step 3: Transferring the transcript to the table

Throughout another reading of the transcript, I selected extracts, copied and pasted them onto the table. Simultaneously, I wrote down in the line column of the table, the line numbers correspondent to the extract of the original transcript.

Step 4: Initial noting – Exploratory comments.

First, I read the original transcript extracts again and highlighted the key words or important ideas I thought it could be valuable to the analysis later on. Then, by listening and reading the transcript again, on the right margins, I made note of important points, general thoughts and any question I might had. Eminent aspects, repeated phrases, particular key words and any important thing I have noticed, such as participant's tone of voice, were noted. I interrogated each sentence as to what it might reveal about the participant's experience. These initial notes were guided by my understanding of the entire transcript and also by my memory of our interaction which was highlighted by the listening of the tape. These notes were often very close to the actual words participants used; they simply highlighted all significant parts of the transcript. This step involved reading the exploratory comments one by one and generating an exploratory coding using descriptive, conceptual and linguistic areas of interpretation for each interview. Three different colours (pink, green and blue) were used to differentiate descriptive, conceptual and linguistic comments. The researcher will then, engage in taking the analysis beyond the descriptive and in generating a more psychological terminology and higher level of abstraction.

Step 5: Developing preliminary emergent themes

At this stage, the main intention was to allow initial themes to emerge but not to be stuck with them and too concerned with producing a final version of these themes. In fact, the idea was to freely allow them to flow and to revise them later on in the process. The exploratory comments were expressed in a more psychological and generalised third person language. These were noted on the left margins of each transcript. At this point there was caution about leaving out information that appeared idiosyncratic or not especially linked with the topic under exploration. It was used strikethrough text for all overlapping or repetitive preliminary emergent themes (ideas). Often, I used the participant's own words on the emergent themes. I then created a separate table for each participant which I named theme table (see appendix 7) and it worked as a summary of all themes and sub-themes emerged along the analysis. Inevitable, some of the participants' expression fit more than one sub-theme, depending on the way it was interpreted.

Step 6: Searching for connections across emergent themes.

This step involved re-reading all noted preliminary emergent themes. I printed them on a paper and then cut each of them, spreading them all over a table. This way it was easier to cluster them according to similar topics. The aim here was to make sense and be interpretative in a systematic way whereby I kept loyal to the data. Because of the larger sample here, as advocated by Smith et al (2009) my focus was on the key emergent themes for the entire group of participants, despite of continuing looking for patterns across the preliminary themes emerged on each participant's analysis. In order to do that in a more methodical way, I developed a

table of identifying recurrent themes (see appendix 8), as suggested by Smith et al (2009, p.107).

Step 7: Producing final themes and sub-themes

The result from the table of identifying recurrent themes, was way too many themes and sub-themes that emerged from over half of participants. It made necessary then, to cluster them again so I used the same procedure as used on step 6. In order to make it clearer to the reader, a graphic was developed demonstrating how subthemes and themes were clustered, combined or merged together (see appendix 9). The final table with all the master themes and contributing participants can be found on the findings section bellow and also on appendix 10.

4-Findings

Through the use of IPA, four master themes and a number of sub-themes within each emerged from the ten semi-structured interviews, which will be discussed here (see table 3). It is important to note that the master themes and sub-themes presented here are a subjective interpretation, I mean, they represent only one possible way of interpreting the participant's account of their experience, not covering all aspects of it. Although all participants shared elements of all master themes, not all of them presented all sub-themes in common.

Following the discussion of each master theme, I will illustrate the subthemes with verbatim extracts of participants' interviews. In order to make it easier to read, extracts might present minor changes and editions. Excluded material will be indicated by dotted lines within brackets (...). Also words have been added to make a reference about what the participant is referring to and they were indicated by square brackets [e.g.]. For confidentiality purposes and following ethics guidelines, all identifying information have been removed from the original transcripts and replaced by three asterisks (***). The pseudonym names used in the Methodology section have been maintained here for a better understanding of each participant's experiences. And it is also relevant to highlight that masters themes and sub-themes are not organised in a hierarchical order as all of them have equal importance. Table 3 shows the master themes and contributing participants to help the reader understanding better the findings.

Table 3. Table of Master Themes and Contributing Participants

Master Theme	Participants contributing	Sub- themes	Participants Contributing
More than words	All	I- Accent II- It's about confidence III- Different ingredients	8 (except Rif and Sylvia) All 9 (except Sylvia)
The relationship	All	I- Rejecting client II- Assumptions III- Presence of the difference	9 (except Sylvia) 8 (except Gersende and Sylvia) All
Cultural link	All	I- More comfortable in a mother tongue II- Practicing in a multicultural city III- Language merged with culture	8 (except Bia and Sylvia) 9 (except Anne) 8 (except Kelly and Mariane)
Special Resource	All	I- More cards to play II- Creating emotional distance or closeness III- Switching language	All 6 (except Anne, Kelly, Katerina and Rif) All

4.1- Master theme 1: More than words

Every word carries in itself a literal, metaphorical, cultural meaning. This master theme aims to capture the experience of all participants regarding what goes beyond the words in the therapeutic scenario, which means, the other things that are important in the communication between practitioner and client.

4.1.1- Accent

This subtheme captures the true essence and felt sense of being a non-native English speaker working in an English speaking city. It is very difficult not to have an accent when speaking a second language, unless acquiring this language in early childhood. This subtheme emerged for ten participants (except Rif and Sylvia) either through participants being self-conscious of their accent or just aware of it. Hopkins and Reed (2008) talked about accent as being connected with racial and ethnic differences. They explored the immediate emergence of these very discernable differences as soon as people start speaking and the impact that it has on their social interactions.

In Kelly's extract, she gives a sense of how her accent has a profound impact on her sense of self. She talked about being self-conscious about it and described how it made her feel anxious when facing her first native English speaking client. She presented it in an interesting way as if her internal self was talking to her. She experienced a fear of the unfamiliar and she also clearly feels mocked by people because of her accent, feeling ashamed of not being able to speak the English language properly.

"... say for me, the most important part of it was my fear... the English language. Hmmm... because it wasn't embedded in me at all. "You can't speak English so look how funny is your accent". So, this I think

was introducing my standards on how am I going to present myself in the room.” (Kelly:78-81)

She also feels diminished by the way she speaks English once she hears a native English speaker talking.

“I think is how self-conscious I am with someone who speaks English with their accent, so it reminds me of how I speak English.” (Kelly:167-168)

Despite mentioning getting self-conscious about her accent, Gersende talked about it in an as-a-matter-of-fact way. She described her accent as something she feels more comfortable with now and something she is more aware than self-conscious. Her perception is that her accent is a negative aspect of her, but at the same time, she perceives it as a positive thing in the eyes of other people.

“And the disadvantage also is my accent, because I’m very much aware of it. (...) ... well like I said, it could be an advantage... they like my accent. It is a disadvantage because I get self-conscious.” (Gersende:213-216)

She also feels more uncomfortable with her accent when she does not have yet a relationship with a client and hopes to be fully accepted by them, despite acknowledging her accent as a possible barrier.

“... I’m just a bit worried. (...) if they will feel comfortable with me and... and... you know... once or twice... they don’t come back. (...) So this is... yeah... the beginning... it’s mostly where I’m aware of my accent, and after that... it’s ok. Yeah. (Gersende:247-250)

Giulia experiences her accent as a rather minor one “a little bit of accent” and she experiences herself accepting it.

“And now I say to myself: “I don’t mind having that... that little bit of an accent”” (Giulia: 345)

Ayda experiences her accent as part of herself and does not see an impact of it on her relationship with her clients. However she mentioned the feeling that when she is with native English speaker clients, her accent can be stronger.

“... I could hear myself speaking in a sort of accent that... is heavier than normal. So... you know... it can get used like that... sometimes... with the difference... (long pause). And I am foreigner and that’s who I am.” (Ayda: 374-376)

So, whether participants experienced having an accent in a more intense heartfelt way or in a more self-accepting way, it is something that is present in the therapeutic room.

4.1.2- It is about confidence

This theme was very evident across all interviewees and it actually emerged long before the start of the analysis. It was clear in participants’ reports that the way they experience being non-native English speakers is linked with how much they believe in themselves as therapists and how confident and comfortable they feel practicing in a second language. Self-confidence and self-acceptance is very often the core of psychotherapeutic work. Professional confidence depends on personal self-confidence. However, a confident person might lack confidence professionally because of inexperience.

According to the Compact Oxford Dictionary Thesaurus & Wordpower Guide, confidence is “self-assurance arising from a belief in one’s ability to achieve things” (p.177). It is related to self-esteem to the sense that it also develops from achievements, parental support and positive reinforcement, and other people’s approval and acceptance (Buchalter, 2015). Confidence is an important aspect of people’s life that is determinant on their performance and success.

Confidence is a sub-theme that emerged from almost all participants’ interviews (except Kelly and Katerina). Participants reported a relative lack of confidence at the beginning of their practice but also felt that their confidence maturing over time. Having trained as therapists in the United Kingdom seems to have really contributed for most participants to feel more confident practicing in English. Also, seven participants (except Kelly, Katerina and Rif) described feeling very natural when speaking English as if it was their first language.

Ayda has been speaking English for thirty years and that has been determinant to the way she feels about it. Speaking English for Ayda is part of everyday life, part of herself now after so many years living with it. She experienced a strong, intimate and long-term relationship which has English language as part of its solid foundation.

“My partner is English speaking. So... we have been speaking English for thirty years and... all my training has been in English. (...) my analysis is in English as well. So I can connect in English... I think... enough... yeah.” (Ayda:555-558)

Similar examples can be found in other participants’ accounts as well. Mariane experiences a certain level of comfort practicing in English once she trained to be a practitioner in this same language.

“... for me it’s been quite... hmmm.... natural because I did the training in... English and I did my first degree in psychology as well in England” (Mariane:27-28)

In Anne’s experience, speaking English is as natural as speaking as her mother tongue.

“... in English I feel as good as in German [her first language].” (Anne:198)

Sylvia can only think about practicing in English as she feels the language is embedded in her professional life.

“... having been trained as therapist in England I think professionally in English. And I am not just saying particular words or something that I wouldn’t be using. But I... hmmm... I reverted to this way of thinking... being a therapist means speaking in English” (Sylvia:214-217)

Giulia feels more opened and comfortable speaking English than in her mother tongue.

“... when I speak English I can fluently express myself rather than in my own native language” (Giulia:39-40)

Giulia acknowledged that her concerns regarding speaking clear and understandable English were rather linked with her ability of speaking English. She confirms her concerns are more to do with her personality and need of being perfect. When I asked her about the way she felt regarding being non-native English speaker she said:

“... the main issue for me is how perfectionist I am.”
(Giulia:199)

What we can conclude here is that regardless participants’ actual capacity of speaking English, the way participants perceive themselves as non-native English speakers is directly dependent on how they perceive themselves, on the experience they had learning the language and on the time they have been practicing in English as well. Bia also experiences the English language embedded in her, as part of herself. She describes experiencing it in a way that it feels like it is her mother tongue.

“And I have been speaking English at home for so long now... that... it really has become a language that is part of me. It’s the language I dream in...” (Bia:484-485)

4.1.3- Different ingredients

Non-verbal communication is an important integrative part of therapy and very often deeply valued by therapists. Here is the account of everything else that is important in the therapy room despite of language. Almost all participants (except Sylvia) talked about the non-verbal, body language, eye contact, the tone of voice, the emotional connection between client and a practitioner as being ingredients as important as language in therapy, if not more important occasionally.

Coupe O’Kane and Goldbart (1998) had non-verbal communication, the communication that anticipates any speech, as the core of their work with young children. They reported the ‘pre-intentional communication’ which occurs when the baby displays signs indicating their wants and dislikes such as smiling, crying,

gurgling, etc, and then the child moving from this stage to the next stage of ‘intentional communication’, learnt from adults. What they call formal communication just comes after these stages.

Knapp et al. (2014) talked about an innate capacity to perceive and learn non-verbal communication that all human beings possess. They explored the communication through touch, facial expressions, eye behavior and how non-verbal behavior can edit verbal communication. According to them, non-verbal communication is also linked to the respective culture and the way it is interpreted so it may differ considerably in people coming from different countries.

Giulia’s experience elucidates this sub-theme very well, having talked quite poetically about what she called ‘musicality of the language’. Giulia experiences language as having a musical dimension which she feels is something to be valued.

*“... the musicality of the language, the... the... the... sort of the way that the language pitches up and down, high or lower”
(Giulia:230-231)*

Giulia experiences a language that is clearer, more useful and more efficient in the therapeutic room which is the language her body speaks. Giulia experiences her particular form of speaking as being rich in gesture and body movements which she feels is extremely valuable in her therapeutic work.

“Italians use a lot of gesticulations when they speak. Hmmm... So everything that is in the realm of... facial expressions... usage of hands, and feet, and body, I use in my therapy... therapeutic work” (Giulia:248-250)

“I work a lot with non-speech, with non- verbal expressions. So a lot of body work. And sometimes I find that more powerful than speaking” (Giulia:51-52)

The use of the word ‘ingredient’ to name this theme derived from Kelly’s own words. Kelly’s metaphor was enlightening. In her experience, she feels that the encounter between client and therapist is more important than the language they speak.

“If you cook a food and you don’t have... let’s say, the perfect ingredient... you find out other ingredients. (...) Language is important. (...) ... but... yes... I think the most important thing is being with someone. Being... not only talking!” (Kelly:193-198)

Other participants’ described similar relevant experiences of valuing and working also with the non-verbal. Mariane experiences the encounter between client and therapist not being dependent on verbal communication. She expressed the importance of other ways of communication such as a look in the eyes or a gesture with the body.

“... the human connection I think it’s... it’s... hmmm...doesn’t depend on the words” (Mariane:189-190)

“But the words are not, what makes it happen. But... hmmm... like with eye contact...with body language...kind of like sounds... hmmm.... of... of understanding... and kind of a... personal connection...” (Mariane:181-183)

Gersende feels that verbal language is only one aspect of the therapist-client relationship. She talked about other much more important things in therapy such as body language and eye contact.

“... the body language... eye contact... hands... hand movements. So there is plenty more going. So... actually... like the... the role of the language does not... it does not take 100%. It doesn't compress everything. There are other things... on the side.” (Gersende:423-426)

Katerina feels that the connection with the client goes beyond language. She described language as being only one aspect of the relationship between practitioner and client.

“It's... hmmm... more just... than... the language thing. It's whether you are bonded together or not” (Katerina:463-464)

According to Rif, Rogers' core conditions for the client-therapist relationship do not depend on the language they speak.

“... empathy, warmth, compassion, understanding that need interpretation... that has nothing to do with the language bit.” (Rif:257-258)

In Bia's experience, the non-verbal communication in the therapeutic process is very important. She talked about what is not verbally expressed in therapy and how this is equally important to the therapeutic process.

“So it's not just what it's said. It's also about the unsaid. And the unsaid requires no language” (Bia:582-583)

In a way, this sub-theme introduces the next master theme below. The relationship between client and therapist is another ingredient, in fact considered by many the most important one in therapy which is beyond language. Even when there is a misunderstanding in the room like dialects and slang terms that are not understood by the therapist, some participants (except Sylvia, Mariane and Ayda) reported valuing the genuine aspect of their relationship with the client and having no problems with asking and clarifying any doubts. Katerina feels the bond with a client as an important aspect of the therapeutic relationship.

“... it was more than language I suppose. We just got on and understood each other well.” (Katerina:139-140)

For Giulia, feeling included, feeling equal to the client as human being is more important than the language difference.

“... doesn't mean very much that I'm Italian. I could be Siberian or Chinese... it doesn't really... that... the language is not... no longer a boundary. Because I'm here as a human being...” (Giulia:275-277)

Anne talked about feeling comfortable asking the client to explain anything she might not understand.

“...if someone explains something to me and I feel like I'm not quite sure whether I'm understanding the exact word that they mean or where they are getting at, I'd ask, I'd find out.” (Anne:75-77)

Rif reported feeling at ease clarifying with her client any misunderstanding in the session.

“the clients kind of ask for some clarification or something. And we... you know... kind of... that bit is clarified in the sessions and eventually we find a way around it.” (Rif:110-112)

Kelly described feeling comfortable repeating a word to a client when she is not understood well.

“... they can ask me again and again if there is something they don’t understand. And also... make me feel very comfortable saying: “oh, clarification”... and of course clarification is part of counselling” (Kelly:131-1333)

Katerina did not seem to feel anxious or uncomfortable about any misunderstandings in the sessions regarding English language.

“when I am not sure of what they say... so they explain it to me kindly” (Katerina:243-244)

Bia felt natural asking her clients to explain the meaning of any word she did not know.

“... we had to stop and explain what something meant” (Bia:163)

Similar to other participants, Anne showed feeling comfortable with clients occasionally not understanding something she says.

“... if they had difficulties understanding what I’m saying I would expect them to clarify with me, to ask me, to find out, to

be honest about the fact that they don't understand what I am saying.” (Anne:71-73)

Giulia feels fine when clients do not understand something that she says.

*“... if they don't understand you, they would say in fact, as you are saying to me: “What do you mean by that?” So, it is fine.”
(Giulia:193-194)*

Gersende reported feeling that the way her client presents might communicate something about the client more effectively than any word he/she may say.

“I have a young lady, (...) she's English and (...) one half of her face is covered with her hair. So... you know... that's important as well, probably it...it... it says much more than many, many words would say.” (Gersende:429-432)

4.2 - Master theme 2: The relationship

Mearns and Cooper (2005) argued that the primary aim in the treatment of the client should be the creation of a therapy relationship. They intended to analyse how far the existence of the human beings is predicated upon relationships. The relationship between therapist and client is a very fashionable subject among the field of counselling and it is for a good reason that most of psychotherapists recently are calling themselves 'relational psychotherapists'. “Because the relationship is therapy” (Kahn, 1991). This master theme aims to capture the beauty and complexity of the relationships between client and therapist and emphasise the dynamics of what happens in this relationship, which is so important for the field of contemporary counselling psychology. Kohut (e.g Kohut 1971, 1977, 1984) advocated external

social relationships as self-objects to help a client to sustain their self-esteem and that the therapeutic relationship is one of a great value in this matter.

4.2.1- Rejecting client

Interpersonal rejection is considered a very distressing and powerful event that almost everyone has experienced at least once in life. The way a rejection might impact people depend a lot on their embedded values and perceptions of self. A rejection can be faced as an ordinary event that happens in one's everyday life or it can generate disastrous psychological consequences in one's self. Almost all participants (except Sylvia) described having the experience of clients rejecting them or imagining that it could happen because they are not native English speakers. Almost all participants (except Sylvia) narrated having had experience or imagining themselves experiencing clients choosing not to have therapy with them because they are non-native English speakers. Six participants (Anne, Bia, Gersende, Marianne, Ayda and Giulia) talked about clients perceiving the therapist as unprofessional or incompetent in the situation of them making mistakes speaking English.

Kelly described the most intense experience of rejection among all participants. Just hearing it, despite of her holding a numb view about it, I got a sense that her client was quite rude and insensitive towards her. I could not help feeling very compassionate towards her.

*"I contacted her and I rang her and I told her: "Look my name is ***, I am therapist and I... They allocated you to me to start therapy." And she said: "Really? You don't speak English. How on earth am I going to speak with you?" " (Kelly:274-276)*

Despite some participants not having experienced rejection or having experienced it more indirectly, they assumed the possibility of being rejected. Katerina feels that she could be rejected by native English speaker clients.

“So I think it might be... difficult for an English speaking client to choose... a foreign counsellor.” (Katerina:367-368)

Ayda feels that her clients can be concerned about being fully understood by non-native English speaker therapists.

“... it can also be very off putting for patients and clients. Because they sometimes might worry... that I don’t get them fully... if I am not English speaking, if I’m not from here.” (Ayda:364-366).

For Anne, the English proficiency directly impacts on how professional clients see the practitioner.

“... if you do make a lot of grammatical errors in the language you would be seen as less professional.” (Anne:172-173)

Bia, Rif and Giulia expressed the possibility of a rejection by a client based on the therapist being a non-native English speaker.

“... they may not want to work with you. Hmmm... may not want to work with a foreigner...” (Bia: 412-413)

“... the disadvantage could be... say... somebody that does not want to work with a non- English person.” (Rif: 219-220)

*“...native English people wouldn’t choose me necessarily”
(Giulia:361-362)*

Mariane felt that some clients do not contact her because her surname indicates that she is a non-native English speaker practitioner.

*“...people... when they see a foreign name sometimes they
don’t even contact you” (Mariane:315-316)*

This sub-theme is closely linked to the one below, as according to participants’ perceptions, clients might ‘reject’ them or prefer to have a native English speaker therapist because they might make the assumption that non-native English speaker therapists might not be a competent or qualified enough therapist.

Gersende talked about the importance of understanding what a client means and that if she did not, she thinks it would be a problem. She feels that her confidence as a professional would be affected if she could not understand well what a client is saying.

*“I can hear my self-doubts... coming into place...as... (...) a
really... hmmm... competent therapist. (...) I would start...
hmmm... doubting... myself in the sense that... (...) I would
question... if they would... see me as a professional, as a
competent professional.” (Gersende:59-63)*

4.2.2- Assumptions

We all make assumptions everyday about everything and most of the assumptions we make incorporate a cultural bias. Eight participants, except Gersende

and Sylvia, they talked about assumptions clients make when realise they are non-native English speakers, even over the phone. They stated that clients can make assumptions based on therapist's accent, foreign name or ability to speak English. Also, according to participants' accounts, when sharing the same mother tongue and coming from the same culture, one might assume they know the other.

Giulia described the problematic of a client who share the same mother tongue with her and the assumptions that come with it. She reported clients assuming they know things about her that they actually do not. Here there is the dilemma of forgetting the subjectivity experience of the individual and assuming they had similar ones.

"... they assume that I know... their background, their cultural background, their... you know... their spiritual believes"
(Giulia: 465-467)

Other participants had views in common. Mariane disclosed making assumptions about clients who have the same mother tongue as her.

"... working in Germany, as a German counsellor... hmmm... I would assume a lot more than I already know about the client"
(Mariane:461-462)

Katerina experiences her clients guessing her background and things about her based on her accent and her surname.

"... they make assumptions and... hmmm... where I'm from. Either by the accent or by the name... or surname."
(Katerina:495-496)

Rif and Anne reported feeling that assumptions are part of the relationship between a client and a practitioner when they speak the same first language.

“I think assumptions get into the way... you know... coming from the same culture, speaking the same language” (Rif:366-367)

“... my experience is less the language itself but the assumptions that probably clients will make” (Anne:340-341)

Bia talked very interestingly about the assumptions people make based on the language the other speaks. She made a reference to the assumptions native English speakers make regarding the social class people fit in, based on the kind English they speak, for example when people speak a more sophisticated and ‘educated’ English:

“... language is the first sign of that divide... and that brings all sorts of assumptions” (Bia:304-305)

4.2.3- The presence of the difference or sameness

We are all different, that is a fact. However, sometimes this difference is forgotten if it is not very evident. All participants positively related being non-native English speakers as a matter of being different. They described their experience of feeling different from the client when counselling native English speakers, or relating and feeling that they share something in common when they are with clients who share the same mother tongue with them.

“... language is just a difference” (Bia:432)

Perhaps Bia was the participant who talked more about this theme illustrating it beautifully with lively examples she experienced in the therapeutic room, both with the presence of the difference and sharing something in common. She described her experience with a client who was not from a French speaking country but who she found out spoke French fluently. Also as non-native French speaker but with fluency in French she shared that with the client, they had this in common and she believed it really made a difference in their relationship.

“And saying goodbye in French, thanking me in French was something I understood as she was pleased to know that we had this in common” (Bia:255-256)

In the example above and below, Bia illustrated her belief that speaking the same language helped building a strong bond in her relationship with her client.

“Yeah, we had that in common, even if we didn’t speak it in the session... Hmmm... And that was it... I think it deepened our connection.” (Bia:286-287)

“... we naturally embraced the differences and held this differences in language” (Bia:174-175)

Bia talked about feeling that the bond she had with her client was more important than their language differences.

“there were many differences between us... Language wasn’t the only one... And we chose not to focus on the differences ... We chose to held the differences quite lightly and to focus on what we had, that was the connection” (Bia:180-183)

In another inspiring account, Bia described a client who came from a completely different background than she did. Bia experienced feeling free from assumptions about the client when their first language was different.

“... it didn’t matter that we didn’t have... anything in common (laughs)... it didn’t matter that I would... and actually it helped because what happened was that I had no assumptions about his experience... there was nothing that I could have identified with.” (Bia:339-342)

All other participants also reported similar experiences. Anne feels a connected to a client when this client is also a non-native English speaker.

“... maybe you have more understanding and more sort of an empathy for the other person, also not being a native speaker” (Anne:458-459)

In Rif’s experience, the presence of the language difference surfaces in the therapy sessions.

“But the difference, the cultural difference... (...) the difference in language (...) was... you know... pretty evident in the sessions” (Rif:40-43)

Kelly experienced both the presence of the difference and the sameness in the room. For her having a client who is also non-native English speaker makes her feel more understanding about the client’s experience.

“... this is an advantage for me to be in a position to know what it means to be in someone’s shoes... when they come from another country” (Kelly:443-444)

On the other hand, with a client who has a different mother tongue, Kelly sees an opportunity to explore other similarities they may have.

“And the acceptance that we are different... also through this, we probably try to find what we have in common.” (Kelly:534-535)

Katerina experienced native English speaker clients who deliberately chose a non-native English speaker practitioner in order to neutralize any similarities and assumptions that came with the sameness.

“some people actually... chose to have... hmmm... a therapist not from their culture. Some chose to have a therapist that is not English speaking so... Something neutral I guess (...) Because is not only the... (stammers) the language that is different.” (Katerina:371-376)

Gersende acknowledged feeling closer to a client who is also non-native English speaker.

“Because... it gives us... hmmm... something together... you know... and we had a similar experience.” (Gersende:127-128)

“they know what is like to speak another language.” (Gersende:509-510)

When Mariane talked about having an accent and I asked her how she felt about it, she said:

“I quite like that there is a difference and that... hmmm... they notice that there is difference.” (Mariane:50-51)

Bellow Giulia talks about the advantage of relating with other non-native English speakers:

“I have an understanding of what it means to... hmmm... seek help in a... in another language other than your own.”
(Giulia:357-359)

4.3- Master theme 3: Cultural link

The impact of cultural differences on the relationship between therapists and clients has been explored extensively. The literature specifically regarding language most often comes accompanied with the cultural aspect of it, which is very difficult to separate. The intimate connection between language and culture was something that the participants experiences and is capture by this master theme.

4.3.1- More comfortable in a mother tongue

Speaking a first language is different from speaking a second language, no matter how long you have been used to it or how comfortable it feels speaking another language. Andre Green (2001) inspiring outlined what he called ‘music of meaning’ that occurs when the very young infant acquires a mother tongue. Eight participants (except Bia and Sylvia) reported either feeling more comfortable speaking their first language or reported their clients feeling more comfortable speaking their first language with the therapist. In both cases the ‘feeling comfortable’ was linked with the cultural aspect of speaking a mother tongue which

is why this sub-theme fits better the master theme ‘cultural link’. Each language carries a respective culture. When client and therapist are speaking their first language they are also sharing the knowledge of a same culture.

Among all participants, Katerina expressed more comfort and enjoyment when conducting counselling in her first language. Katerina feels more connected and closer to clients who speak her first language.

“And obviously helping someone from similar culture is more enjoyable... it's about that, really. It's a different connection, I think.” (Katerina:189-190)

“it just makes everything, everything more colorful, more vivid, more... hmmm... you just... hmmm... yeah... We just understand each other much quicker.” (Katerina:229-231)

Mariane talked about believing that clients feel more comfortable speaking their first language. She made an interesting analogy of her feeling comfortable being directly related with how comfortable her client feels. In this sense, she cannot help mirroring clients’ feelings.

“I would also think that they would be more like... hmmm... I don't know... “This is not so good”, “I would prefer someone who speaks perfect”... you know... your first language... German or English. And... so I think... how uncomfortable I feel depends a lot on how... the client feels uncomfortable too...” (Mariane:246-250)

Bia described her relationship with her therapist who comes from the same country as she does and speak the same mother tongue as she. She reported believing

that her connection with her therapist would have been the same if their first language was not the same. But at the same time, she feels that having the same first language made her feel more comfortable in their relationship.

“I don’t think it would have been a problem if he hadn’t been Brazilian. I think I would have been able to do it just as well. But it created a level of comfort that I may not have had... with... with a British therapist” (Bia:547-550)

Katerina’s explained her choice of a therapist who shares her first language and comes from the same culture. She elucidated that it feels much more comfortable for her to speak her mother tongue and share the same culture.

“... I have chosen it not only because of the language but because of the cultural aspects. I wouldn’t have... wanted another therapist here... one that I had to spend my time explaining my culture.” (Katerina:84-86)

“I will always... hmmm... express myself better in my own language than English” (Katerina:220)

Rif described a very similar experience. She talked about counselling many clients in her first language and feeling more at ease with them. She also reported her clients feeling much more comfortable having therapy in their mother tongue. She made the link Katerine made above about this comfort being related also to sharing the same culture not only the same language.

“And there are some clients who do know English as well as Hindi but are more comfortable to express themselves in their

mother tongue. More comfortable or... you know... they are able to express themselves better.” (Rif:129-131)

Similar to Katerina, in Rif’s experience, therapist and client understand each other better when sharing the same mother tongue. Rif talked about feeling that clients are more comfortable in the therapeutic room when they speak the same first language as practitioner. She feels that the relationship flows better in this case because their mutual cultural understanding.

“... the clients feel instantly comfortable because I’m speaking their language and they feel that I understand better the client... you know... relates to me better. In the sense that they feel that... you know... that I will understand them. I will understand their issues because things work differently in the Western culture.” (Rif:144-148)

“And working with... you know... people speaking my language... again it... it... again it is helpful in terms of understanding this person and this culture.” (Rif:234-236)

Other participants reported similar feelings when speaking their mother tongue. Ayda feels more familiar, with her heart closer to clients who also have French as first language.

“And with the French and... therefore when I am with French people it’s... it is as if I were at home. It’s easier.” (Ayda:209-211)

Gersende described an even more profound sense of connection with clients who share her mother tongue when she described a feeling of safety and a feeling of belonging.

“... a place where you feel safe, and one might think logically... that you would be safer amongst your own, amongst your own ones.” (Gersende:528-530)

Kelly feels more loosen and also less concerned about language when she is with Greek clients.

“With the Greek, I am more relaxed... a little bit... my unconscious. But with the English client, it is a little bit more... There is something like: “Oh! Probably I have to think... (laughs)... to say something”.” (Kelly:462-464)

Giulia experiences her Italian clients really valuing being able to speak their mother tongue with her in therapy.

“... mostly what people say is: “It’s important to me to speak my own language when I do therapy”. Definitely that is the feedback I have from the Italian people.” (Giulia:221-222)

4.3.2 Practicing in a multicultural city

London is undoubtedly one of the most cosmopolitan cities in the world. But what this sub-theme covers that almost all participants (except Anne) described is how this is relevant or impacts on their work as non-native English practitioners. Gersende feels that London embraces other cultures as part of its own.

“London is so... multicultural... that I feel very much at home.” (Gersende:313)

Kelly talked about British people living in London being more tolerant towards her accent because they are used to hear all sort of accents from everywhere.

“Here in London... yes, I work with... hmmm... how to say... ranges of people from all over the world... And ... It is funny enough that now that you are talking... hmmm... with English... with people who English is their first language... hmmm... I feel more relaxed and they feel more tolerant towards me, towards my accent...” (Kelly:30-33)

Rif feels that practicing in London is an advantage because of the diversity of the clientele.

“London has a very cosmopolitan culture, you have people from, you know, many nationalities here.(...) Advantage, yes. Because I feel, we have more jobs openings coming for us.” (Rif:206-207)

Katerina described not being unusual for a British client to choose a foreigner counsellor as they are used to be surrounded by people from all over the world.

“...it’s London and people are used to foreigners” (Katerina:368-369)

Bia compared the work of a non-native English speaker in London with the work in the countryside. She also feels that the wide range of cultures found in London help clients being more open and receptive towards non-native English speaker practitioners.

“... bigger cities have a much wider acceptance, mentality; they are much more open minded and much more in touch with variety and diversity. Hmm... then... and in smaller towns, people tend to be more conservative and more stuck to their ideas and more fixed on what they believe is the world as they understand to be and not so open minded.” (Bia:437-441)

“... it’s been London... So maybe if I had been somewhere else in Britain it would have been a little different... but London is such a multicultural international place anyway. So I had never felt that there was any sort of resistance or criticism...” (Bia:47-50)

“... in London... anywhere you go you will be working with foreigners. Anywhere you go you will be served by foreigners or have friendships.” (Bia:460-461)

Mariane and Giulia also made the same comparison. Mariana feels that it would be more challenging to be a non-native English practitioner if she was living in other city in England rather than London.

“I think here... because there’s such a broad culture... is... it can really be both. Hmmm... maybe in a smaller town it would be really more a disadvantage than anything else.” (Mariane:489-491)

“I think here... because there’s such a broad culture... is... it can really be both. Hmmm... maybe in a smaller town it would be really more a disadvantage than anything else.” (Mariane:489-491)

Giulia feels that perhaps she would not have many clients if she was working in a smaller city with no such diversity as London.

“... living in an environment of countryside, English countryside. Because I know I would be really maybe more of an exotic flower there. Then... then... I don’t know if there I could be so successful... actually in the middle of English countryside” (Giulia:506-508)

“Because I think English is... in... in London we have so many different cultures that it’s not... I’m amazed actually, and how English people don’t actually... have any problems with... adjusting their ears to all this different accents they hear every day.” (Giulia:318-320)

Sylvia reported that, because she lives in London, more than half of her clients are non-native English speakers:

“I am saying that because being in London I see a lot... I mean... probably 50/50 if not, occasionally even more, people who are non native speakers.” (Sylvia:64-65)

“...because it is London, people are used to it” (Sylvia:155)

Ayda feels that it is very important focusing on diversity when training to work as a practitioner in London.

“... in London is particularly important because is such a cosmopolitan area” (Ayda:533-534)

4.3.3- Language merged with culture

It is extremely difficult to refer to language isolated from culture and that was very evident during the interviews. Almost all participants (except Kelly and Mariane) described a real struggle in separating their experience of language from their experience of culture. Very often, it made necessary to prompt participants to focus on the language when inevitably and unnoticed they started talking about culture. Giulia feels that the cultural barrier overcomes difficulties related to language.

“And I think that was more of a cultural... hmmm... difficulty, more than an accent. Hmmm...hmmm... and maybe a little bit of an accent.” (Giulia:316-318)

“And it’s not only the words. It is context and culture.” (Anne:204-205)

Gersende often talked about the connection between language and culture and often struggled to separate the two of them. She feels that language is embedded in culture.

“I think it’s... the language... but the language in the sense it’s related to the culture.” (Gersende:70-71)

“I’m not so sure it’s language. But it is language related to culture.” (Gersende:112)

“So... you have a... a broader... experience... of... not only cultures but also language... because language reflects culture in many ways.” (Gersende:198-200)

Ayda experiences language merging with cultural understanding. She gave an example of her therapist who is native English speaker but also speaks French, illustrating language and culture walking side by side.

“... her French is excellent and she has excellent knowledge as well of a background in French.” (Ayda:300-301)

“... the culture and the language when you grow up as a child just goes hand in hand.” (Ayda:194-195)

“...the language goes with the culture.” (Ayda: 422-423)

"I think it's important is to understand the connection between the culture and the emotional expressions... non-verbally and verbally.” (Ayda:525-527)

Katerina experiences that certain peculiarities of a language and the way language is spoken are linked with the respective culture.

“in our language we are more directive than in English language” (Katerina:81)

Rif demonstrated a real struggle trying to reflect upon her experience about language. She described being unable to separate language from culture.

“Maybe it is just that I'm finding difficult to focus just on the language aspect because when I think about those clients is the whole experience that comes to my mind. So it is getting difficult to focus on just of the role of language.” (Rif:352-354)

“I’ve found myself getting a bit stuck or kind of... you know... not been able to separate the language bit from the culture bit from the whole experience.” (Rif:405-406)

4.4- Master theme 4: Special resource

It is not open for discussion that psychotherapy depends primarily on verbal communication, language in this case, which is why psychotherapy is widely known in the field as “the talking cure”. Speaking more than one language represents for all participants an additional resource in the therapeutic room which provides the individual with more tools and opportunities to carry out special manoeuvres when expressing themselves in therapy. This final master theme draws upon the common ways in which participants described their experience of being non-native English speaker therapists working in London.

4.4.1- More cards to play

When you have more cards to play, you are more likely to have an advantage in comparison with opponents playing the same game. D’Ardenne and Mahtani (1999) suggested that counsellors who work in more than one language to have an extra tool and a greater option on how to use language. All participants considered being non-native English speakers working in London an advantage because they are able to offer therapy in more languages which gives them more options of client groups. Rif feels that there is a wider range of clientele available for non-native English speaker practitioners.

“Advantage, yes. Because I feel, we have more jobs openings coming for us.” (Rif:212-213)

Ayda experienced the possibility of clients distant themselves or getting closer to their feelings based on the language they choose to use in the therapeutic room. She feels that it is an advantage to be a practitioner who is able to offer this choice to clients.

“Some prefer speaking in French and being able to speak French in London because they feel lonely and... but... you know... And others rather be taking that distance and rather speak English. So the advantage to have the languages is to be able to do both.” (Ayda:398-401)

Mariane feel that there is an advantage of being a practitioner who is able to offer therapy in other languages as well as English.

“you have something else to offer that not everybody... has... if you can offer therapy in different languages.” (Mariane:309-310)

Anne also expressed similar feelings.

“it’s an advantage. Because one I can offer more languages.” (Anne:267)

Bia experienced having more space, feeling free when she can use more than one language in the room.

“we spoke mostly in Portuguese but... there was room for me to allow a thread of thought to develop in English, if that was

natural to me. (...) But it was nice to have that choice.”
(Bia:531-533)

Katerina expressed being looking forward to have Greek clients and when talking about this expectation it could be perceived a real sense of belonging and of familiarity.

“having the possibility to do it in a different country but still in our language... where I suppose that... there is... some hope that maybe I’ll... I’ll find my own clients. So... and...yeah, rather than just English speaking clients.” (Katerina:195-198)

Kelly also feels that being a non-native English practitioner is a plus as she has something extra to offer.

“The advantage is that I can see Greek who doesn’t like to be seeing by English people.” (Kelly:435)

Giulia described having many foreigner clients who she believes are attracted because she is also a foreigner and offers therapy in more than one language. She also mentioned that she did not expect to attract so many Italian clients as she did. Giulia feels privileged to be non-native English speaker and she thinks that she attracts more clients because of this.

*“I would say that the majority of my clients are foreigners. I think... you know... if you came to **** website, they are all English. I’m the only one that isn’t. So, I attract lot of foreigners and I have to say that it’s a real advantage...”*
(Giulia:85-87)

Giulia acknowledged having an extra tool as a non-native English speaker practitioner.

“It is a little bit like being on a performance... rather than with an English person, because with them that is all they know. But with a non-native speaker, English speaker that is like... I don’t know how to say this... it’s very much like... It is an extra gear for both of us.” (Giulia:97-100)

When I asked Rif how she feels being non-native English speaker working in London, she feels that she has advantages, more resources to work with her clients.

“I feel privileged really. I feel that I have access to a much wider client list” (Rif:328)

4.4.2- Creating emotional distance or closeness

This is a very good example of what language enables people to do. It was fascinating listening to six participants (except Anne, Kelly, Katerina and Rif) describing clients distancing or getting closer to their feelings depending on the language they chose to speak. Costa (2014) described people experiencing ‘heightened emotionality’ when speaking their first language. She discussed how using their mother tongue to communicate, clients connected better with early memories and emotions. Ayda experienced being able to distance herself from her feelings when she is not speaking her first language. She also accounted her experience with clients choosing the language to speak in therapy accordingly with their needs to feel closer to home or to distance themselves from their feelings.

“... the slight distancing that happens in English because is not my mother tongue” (Ayda:38)

“Some prefer speaking in French and being able to speak French in London because they feel lonely and... but... you know... And others rather be taking that distance and rather speak English.” (Ayda:398-400)

Ayda also talked about a client whose first language was also French but she chose to have the sessions in English. When I asked why her client chose not to speak her first language in therapy, she explained to me that in her experience, the choice of which language to use in the room depends on how willing clients are to get close to their feelings.

“I think there is a need to have a distance from the original... Her senses of origins are... there has been a painful history. So she has taken a step back from that.” (Ayda:109-111)

She then talked about her experience with German clients and conducting the session in German, which is her second language. She experienced an emotional distance when speaking a second language.

“I have no connection to Germany. I have no connection... So when people come from Germany I can... I can... I can have a normal good conversation. But there is an emotional distance, I think... because we don't have that... hmmm... communication... about things that we might recognize.” (Ayda:168-171)

In addition, she described her experience with personal therapy and talked about her choice of having a native English speaker therapist but who also speaks French. She justified her choice of therapist based on the languages he spoke. She saw the possibility to keep an emotional distance from feelings that were difficult for her and also the possibility to express herself more opened using different languages.

"I have had enough distance to look at what happened in my past... by working through English." (Ayda:304-305)

"... we can expand the world in both languages enormously. And it's exciting, really. Because actually it can free people up to think about their emotions maybe with a little bit of distance that is sometimes helpful." (Ayda:282-284)

Gersende described a French client who suffered a sexual abuse in her childhood and chose to have therapy in English. Gersende also experienced the possibility of using more than one language in therapy as a very resourceful and helpful tool in the process, allowing clients to distance themselves from hurtful feelings whenever needed.

"we used English... to go back... hmmm... to the trauma... and then... of course we went back... I... I followed her, then... She actually went back several times, which was really helpful... and then... as... as she went back, she was able to use words to describe her abusers... in French. And she didn't use those words in English I've noticed. (...) ... because... they were French bastards (Laughs), not English bastards. Yeah... So if you can use actually language to create distance, but... even for a client to create distance for themselves... as they go

through trauma... or you can get to get closer. Yeah...”
(Gersende:466-474)

“... if you... if you have... had a... traumatic... hmmm... experience in France... then you might choose to... relate to it in English... to distance yourself. (...) ... having another language allows you to have distance.” (Gersende:446-450)

“... because you can use language to create a distance.”
(Gersende:459)

Mariane also experienced clients using language to distance themselves from feelings. She related the pace and tone of voice clients use in their talk with the avoidance of getting in touch with their feelings.

“... a lot of times people can hide behind talking a lot or... lots of words (...) I can also be articulate and fast. But then we’re not... we’re kind of moving away... from the emotions and the feelings. I can also be articulate and fast. But then we’re not... we’re kind of moving away... from the emotions and the feelings. Because I always think that the more words (...) the less in contact... hmmm... we both are with what’s going on. (...) I think they use a lot of talking... to avoid... things.”
(Mariane:141-148)

Other participants elucidated similar experiences. Sylvia experienced the possibility of neutrality when speaking a second language.

“It’s not like being at home speaking to mummy... and is not like being at work speaking to someone else. And I think that

specialness has to be preserved and therefore they speak English... because it's neutral and it fits this situation.”
(Sylvia:474-477)

Bia felt that it was easier for her to explore issues that happened in her childhood in her first language.

“a lot of my explorations had gone back to something I really wanted to explore about my childhood. And it was... those memories were... more apparent in my mind in the language that it happened at...” (Bia:543-545)

Giulia experiences the language she speaks defining who she is and as very influential on the way she presents herself.

“When I speak English I’m definitely... the mature... more adult self. When I speak Italian I am much more the playful younger person that I left in Rome... twenty eight years ago.”
(Giulia:110-111)

“I know when the language sometimes can be... a hindrance to someone getting more grounded or more embodied in their feelings.” (Giulia:62-64)

4.4.3- Switching language

This sub-theme could be interpreted as being very much intertwined with the sub-theme above, however here all participants talked about using two or more languages in the room as an extra resource for untranslatable words and expressions, or words that have different meanings in a different language. Switching language is used to aid a better understanding of what one is saying. This sub-theme is about the dance of switching from one language to another.

“So, it’s not about the language, it’s about what I mean by those very simple words” (Giulia:76-77)

Gersende talked about a German speaker client who chose her as a therapist because she wanted a native French speaker therapist. She explained that client’s mother was French and she wanted to work on issues she had with her mother. She experienced switching language in the room, having illustrated that, despite of conducting the sessions mainly in English, client would use French words occasionally.

“there would be a few words that would come in French. Hmmm... while describing the atmosphere at home... she would say that in French.” (Gersende:184-186)

Despite of having a native English speaker therapist, Ayda experienced speaking her first language occasionally with her therapist.

“But my analyst has very good French, so I do use French words.” (Ayda:297)

Ayda also talked about a client who has the same mother tongue as her but chose to have therapy in English. She feels that it is an extra resource to be able to use more than one language in the room whenever necessary.

"I am working with a French person at the moment who does not want to have analysis in French. But what happens a lot is that there are words that can't be translated... so it comes into the room in French." (Ayda:104-106)

"It means that I fill the gaps with English words sometimes." (Ayda:133)

"And... that might be that we sometimes use English words... sometimes... during... whatever it is. And that's comfortable." (Ayda:152-154)

"... if something came easier in English, we would use English. So that's what we do." (Ayda:252-253)

Other participants also reported the experience of switching languages in the room and the difficulty in translating certain words and expressions into another language. Katerina highlighted feeling that there are words that are untranslatable.

"... that certain things are...difficult to translate (laughs) because it has different meaning behind it." (Katerina:104-105)

Ayda feels really resourceful and joyful the possibility of switching languages in therapy.

"Apart from... you know... the gaps that can happen there is also... it is very creative... because we can expand the world in both languages enormously. And it's exciting, really." (Ayda:281-283)

Gersende experienced a client who chose a language to speak in therapy according to the period of time she was referring to.

“We work in French and English... depending on whether... we’re going back... into her childhood... which was in France... or more current problems which are happening here.” Gersende:(68-69)

Sylvia experienced that, despite of non-native English speaker clients choosing to speak English in the therapeutic room; they often refer to their mother tongue to express something they are not able to translate into English.

“Usually when I offer to speak to them in French or Italian or Polish, Polish is fine; but people prefer to speak in English. And we occasionally resort to special expressions in their language. (...) I find that certain languages fit the culture from which the person comes. In other words, they have certain expressions that do not exist in other languages, almost every language has that.” (Sylvia:65-70)

Giulia also experienced switching language in the room when she reported using English words in the sessions with her Italian clients.

“one word is boundaries. I always talk about how we make boundaries for ourselves. And in Italian it sounds... hideous. And so also finding maybe translating the word... in a way that... it actually sounds and is... effective and useful for the client.” (Giulia:161-164)

Gersende also highlighted using more than one language in the room as a helpful source of expression for her clients.

“... they might say: “I can’t think of the word in English”. I’d say: “So tell me in Italian!” ” (Gersende:205-206)

Bia also experienced English words coming into the room even when she is with a client who speaks the same mother tongue as her.

“... we both conducted the conversation in Portuguese... Yet very often there were English words in our conversation from both sides.” (Bia:519-520)

Rif experienced losing the real meaning of a word when translating it into English, explaining the need to use also her mother tongue in the room.

“... there are certain things I want to express... certain emotions I want to express... or... you know... or my feelings about the thing and I have those words to express those subtleties... which maybe in a way I might be lacking when I’m speaking English. So... that’s the difference I feel. Yeah... yeah... so... the subtle differences, the subtle nuances I have the words for them, just the right words for them in Hindi.” (Rif:157-162)

4.5- Summary of results

The first master theme, 'more than words', suggests that other factors rather than verbal language and words may also play a part in the therapeutic scenario. The first sub-theme, 'accent', shows participant's awareness of their accent. The second sub-theme 'it is about confidence' highlighted how therapists' self-confidence impacts on therapists' experience of being non-native English speaker practitioners. The third sub-theme, 'different ingredients' focuses on the other features that influence the client-therapist relationship such as non-verbal communication.

The second master theme, 'the relationship', relates to the core of therapeutic work. From this master theme derived the first sub-theme 'rejecting client', which name participants' experiences of feeling rejected by clients for being non-native English speakers. The second sub-theme, 'assumptions', is about how participants experience the presence of assumptions in the therapeutic room. The last sub-theme, 'the presence of the difference or sameness' concerns the experience of having native English speaker clients and the experience of having clients that have the same mother tongue.

The third master theme, 'cultural link', illustrates how culture is intertwined with language. The first sub-theme, 'more comfortable in a mother tongue', describes participants' experience of feeling more comfortable in their mother tongue, as well as experiencing their clients feeling more comfortable speaking their first language. The second sub-theme, 'practicing in a multicultural city', focuses on participants' experience practicing in London and how this particular city impacts on their relationship with clients. The third sub-theme, 'language merged with culture', highlights the difficulty separating language than culture and how both of them are very much intertwined.

The fourth and last master theme, 'special resource', considers a second language as an extra resource in the therapeutic process. The first sub-theme, 'more

cards to play', shows participants' experience of considering speaking another language as an extra tool to enhance their relationship with clients. The second sub-theme, 'creating emotional distance or closeness', concerns how the use of a mother tongue or a second language can serve as a way of getting closer or more distant from feelings. The last sub-theme, 'switching languages', relates to participants' experience of using more than one language in therapy.

5-Discussion

5.1- Discussion of the Findings

As noted in the literature review, previous researchers have pointed to language problems as an obstacle to practitioner-client relationship. Vontress (1974) goes even beyond that when he argues that language issues can be a barrier to achieving therapeutic positive outcomes. However, this study has found that the relationship between client and therapist goes beyond language, and in fact, the therapeutic relationship can overcome language related difficulties.. The first master theme, ‘more than words’, represents other factors that can influence the relationship between client and therapist. In fact, participants were keen to point out that the unsaid and the non-verbal were just as vital in therapy as verbal communication.

As regards the sub-theme, ‘accent’, we were able to note that participants were very much aware of their accents which mark them out as non-native English speakers. Indeed, as Hopkins and Reed (2008) pointed out, accents can be seen as an evident visual sign of a different race or ethnicity. The word itself is Latin in origins and denotes tone, signal or intensity. While the *Compact Oxford Dictionary Thesaurus & Wordpower Guide* describes accent as a “way of pronouncing a language”, the *Collins English Dictionary* conceptualizes it as “the characteristic mode of expression of a person or a group, especially one that betrays social or geographical origin”. In general, participants maintained that proficiency in English was not usually a problem and that, more than the words themselves, their accents were actually the issue either because it makes them aware or self-conscious or because it generates misunderstanding in the therapeutic room.

Iannaco (2014) suggested that liking or disliking an accent can impact the ways therapists and clients relate to each other, and this study supports such a statement. Despite being aware (even to the point of self-consciousness) of their accents, participants did not mention major difficulties communicating with clients, in contrast with the observations made by Jain and Krieger (2011). Therefore, I feel confident in concluding that the relationship between doctors and patients must differ significantly from the one between clients and therapists (a relationship that will be discussed in greater detail under the sub-theme ‘different ingredients’, as a powerful tool to overcome language barriers).

The sub-theme ‘it is about confidence’ indicates the importance of the therapists’ personal development and encourages us reflect on how their own experiences may impact their work and the relationship they build with clients. Thus, this sub-theme provides a valuable insight into how different experiences affect us depending on how confident we are. In fact, as mentioned previously, confidence or the lack of it, quite often forms the core of clients’ issues which makes it all the more interesting now to discuss therapists’ confidence levels. It could be argued that confidence may be directly linked to trust in one’s self and thus participants of this study who demonstrated confidence whilst speaking English were regarded favorably as in general, confidence promotes comfort and openness in their relationships with clients. However, confidence can also be dangerous if taken to extreme levels as it can completely blind therapists to their limitations and areas of improvement.

The sub-theme, ‘different ingredients’, relates to other essential elements of therapy aside from verbal communication. Of course, we cannot know for sure exactly how much language is vital to the therapeutic outcome, although indeed, such an examination would form a useful avenue for future study. What we do know here instead, is that other factors (‘ingredients’) are just as significant as language in

the counselling room. As far back as 1998, Hoffman, described the connection between human beings that trespassed any linguistic or cultural borders. Whilst Asay and Lambert (1999, cited in Dryden & Reeves, 2008) reported the therapist-client relationship, or a the shared humanity, as being responsible for about one third of the results of therapy, the findings of this study venture to place this figure higher.

In the second master theme, ‘the relationship’, participants talked about the value of the therapeutic alliance and its dynamics. In addition, many illustrated the sub-theme ‘rejecting client’, and described experiences where clients refused to engage with therapy because of their accents or their surnames. Such rejection can impact negatively on therapists and cause much distress and psychological damage. However, one could argue that rejection is, if not an everyday occurrence, at least a common one, and therefore individuals in good psychological health should be able to experience mild rejections with little or no impact on their psychological well-being. Other participants, whilst recounting having not experienced rejection however imagined that it could happen.

No one is free of assumptions. Costa (2014) discussed the danger in making assumptions and the uniqueness of each individual. We make assumptions all the time, and we also experience the psychological consequences of people assuming things about us. Connell et al (2016) described that in the relationship between practitioners that does not share a mother tongue with clients there is an absence of what he called ‘illusion of understanding’, which is when a practitioner takes for granted what the client says. The sub-theme, ‘assumptions’, covers the many ways assumptions can impact on the therapeutic relationship. Specifically, participants mentioned the stereotypical assumptions made by clients based on therapists’ accents, foreign surnames or linguistic mistakes. Furthermore, assumptions were also made about therapists’ backgrounds and also their competence as professionals.

The following sub-theme ‘the presence of the difference or sameness’ refers to factors noticed in the room which are often dismissed or ignored as unimportant. However, it must be pointed out that noticing something does not necessarily mean addressing it or reflecting on it. For example, the findings suggested that participants maintained language differences, although meaningful, were no more significant than other differences such as race, ethnicity, or cultural background. It suggested that language play a much larger role than previously thought, however more research is necessary to explore this further.

To conclude on this topic, we all know that we are different and unique. Yet, more often than not, we also find common ground with others. Differences and similarities exist in any relationship. An important aspect of this sub-theme is how such factors were dealt with in participants’ experiences and how they impacted therapeutic alliances with their clients.

The third master theme, ‘cultural link’, represented the greatest dilemma when examining language in the therapeutic room. The sub-theme, ‘more comfortable in a mother tongue’, describes how therapists and clients often feel more comfortable speaking their first language. This led D’Ardenne and Mahtani (1999) to recommend that clients to seek therapy in their mother tongue, arguing that familiar and shared cultural experiences lead to a deeper connection with their therapists.

According to Stevens and Holland (2008), practitioners often felt anxious when conducting therapy in a language that was not their mother tongue. Such an effect was observed in just one participant of this study. Despite some of them expressing the view that they felt more comfortable when they were conducting therapy in their mother tongue and some others expressing the view that they felt that their clients felt more comfortable when their therapist spoke their mother tongue,

generally participants did not express any negative emotions. Instead, most of them felt comfortable and confident speaking English.

The sub-theme, ‘practicing in a multicultural city’, refers to London and relates to practicing in a city which includes immigrants from all over the world, where more than 700 different languages are spoken. Intriguingly, some participants relayed that being non-native English speakers practicing in a city as diverse as London actually helps their practices and even enabled them to attract more clients. In many cases, it also provides them with an opportunity to practice in their mother tongue, an opportunity which doubtless would have been denied them in a smaller town. Thus, participants concluded that practicing in a city as large and diverse as London actually facilitates their work, especially as people are more open to accept and embrace other cultures and languages.

The sub-theme, ‘language merged with culture’, reflects the intimate connection between language and culture, a notion that has also been discussed by other researchers in the field (e.g Nguyen, 2014). Language and culture are very much intertwined and as many researchers note, it is very difficult to isolate one from the other (Iannaco, 2014; Nguyen, 2014; Szekacs-Weisz and Ward, 2004). For example, Verdinelli and Biever (2009) acknowledged an obstacle in the therapeutic relationship when practitioners are conducting sessions with clients who do not share the same language and culture.

The last master theme, ‘special resource’, covers the main benefits of being a non-native English speaker therapist working in London and includes the creative use of verbal expressions and the special tools that people who speak more than one language hold. This master theme supports D’Ardenne and Mahtani’s (1999) statement that therapists and clients who speak more than one language possess an extra tool in therapy.

The sub-theme, ‘more cards to play’, refers to having more tools to contribute to a successful therapeutic outcome. Obviously, as therapists we know that the more tools one can bring to the game, the better. It is interesting to note that the majority of participants considered being non-native English speakers working in a multicultural city an absolute advantage because it enabled them to offer more languages to a wider range of clients and special communities. London attracts immigrants from all over the world and the number of immigrants living in London increases every day. Many of them arrive without any knowledge of English and often find shelter within their own communities.

The sub-theme, ‘creating emotional distance or closeness’, relates a lot to the sub-theme above (‘having more cards to play’) and the one below (‘switching languages’). It basically refers to clients or therapists who speak more than one language, and who can, therefore, resort to another language to describe or explain a feeling or an experience, providing more options and more tools for both clients and therapists to utilize. This sub-theme supports the Kaplanski’s (1998) study which described the possibility of clients employing different languages to effectively express their feelings and emotional experiences. This notion also supports Pizarro’s (1995) theory that people’s emotional intensity decreases or increases depending on the language they choose to speak.

The participants reported that in their experience, sometimes clients may feel the need to keep a certain emotional distance from what they are talking about in order to better cope with their experiences and be able to explore it further. They reported that when therapy was being conducted in client’s mother tongue, the client would sometimes switch into another language such as English as a strategy to achieve some distance from what is being talked about. One participant talked about a client who spoke the same mother tongue as the participant but deliberately chose

to have therapy in English because this way she could keep an emotional distance from very difficult childhood experiences. This is consistent with Ali (2004) suggestion that bilingual people can use the languages they speak in an effective way to explore painful or traumatic events they experienced in life.

Burck (2004) also argued that people experience the world and themselves differently depending on the language they choose to speak. In addition, Foster (1996) reported the importance of language and its role in defending one's world view and psychological experiences. Further dimension of language, participants reported that social positions and educational level reflects on language. This supports Shotter (1993) position that language relates with individuals' class and social position which reflect education and wealthy.

The sub-theme, 'switching languages', highlights the advantage of speaking more than one language in the counselling room, especially being able to use more than one language interchangeably. The possibility of using more than one language to express oneself or to better describe a feeling or experience is enormously creative. This sub-theme aims to cover aspects of switching from one language to another and seeks to explain the advantages of this ability to both client and therapist. It especially covers the different meanings of words, how to translate the untranslatable and searching for the right word. This is consistent with Costa (2014) observations that clients who experienced this resource found it very beneficial. She also discussed the possibility of using language creatively and allowing more languages in the therapeutic room, regardless the understanding of it.

Imberti (2007) gave a beautiful account of this when he linked the notion of people switching languages with their identity, which, in many cases, transformed their world view. In addition, Szekacs-Weisz and Ward (2004) also argued that switching languages includes situations where different meanings of the same word

can cause misunderstandings or exact translations into other languages is not possible, which is consistent with this sub-theme. Similarly, Laungani (2004) described the different cognitive and emotional meaning of words. The present study supports the finding that switching language in therapy can be a powerful resource.

5.2- Overview

For most participants in this study, language is acknowledged as an important aspect of the psychotherapeutic relationship that needs attention. Through sentences and words we, as therapists, expect to discover significant truths, to interpret what clients say and to help them make sense of their emotions. Clients seek therapy because they need someone to understand them on a different level that they understand themselves, from an outside perspective, genuinely and not judgmentally. Despite the realisation that people's self-understanding will always remain partial and emergent (Hopkins and Reed, 2008), in an ongoing process of knowing themselves, this understanding is still an essential part of therapy and the most significant aspect of a positive therapeutic outcome.

Communication in therapy mainly comprises of verbal language. However this is only a part of communication as other methods including silence are just as meaningful. In other words, silence can be very powerful and can comprise a very active form of expression in the counselling room. The findings of this study have reinforced the notion that non-verbal communication is still of huge consequence in the therapeutic process.

The difficulty in separating language from culture and vice versa was very clear in most participants' experiences. For example, participants very often ended up talking about cultural issues when they were actually trying to focus on the

language aspect of their experience. Participants seemed to find it hard to talk about this; their responses were particularly hesitant. Understandably, this could indicate that the topic was either emotionally charged or difficult to explain or connect with, although for the purposes of this section, I would really advocate for the latter. This is consistent with what Iannaco (2014) reported of the difficulty of reflecting upon the language subject in the therapeutic setting because of the intimate aspect of language, which relates to old parts of ourselves on a verbal and pre-verbal level.

As Hopkins and Reed maintain, language can be acknowledged as a “powerful source of tension and social distance” (2008, p.51). Relational therapists in particular, appear much more open to explore issues with their clients when they arise and are often able to communicate creatively despite language difficulties, which Hopkins and Reed (2008) discuss from an interesting ethical viewpoint. As such, they explored therapists’ ethical responsibilities relating to sensitivity whilst ensuring that clients’ needs are well addressed.

The findings of this study have corresponded to researcher’s interpretations of how, in general, I believed the participant was thinking (Smith et al., 2009)

5.3- Implications for Counselling Psychology

The increasing number of immigrants living in multicultural cities such as London and accordingly, the increasing numbers of would-be clients seeking therapy certainly means that we can no longer neglect the issue of languages spoken in therapy. This study emphasizes the influence of language in therapeutic relationships and explores fundamental aspects of this dynamic. The results delineate both

advantages and disadvantages to being a non-native English speaking therapist working in London. They also indicate the need for therapists to be mindful of the impact of language in therapy.

The findings of this study not only support existing research but also extend it by examining the relationship between clients and non-native English speaking therapists. The findings can help professionals to have a more theoretical and experiential awareness of the impact of language in their counselling rooms. Such awareness may help to anticipate or minimize many issues. For those professionals offering therapy in their mother tongue (when sharing the same language with a client, in order to be attuned with their experiences), this study highlights the importance of taking into account clients' cultural beliefs and assumptions for granted.

This study also offers an analysis of the experience of what being non-native English speakers feels like through the eyes of completely different individuals, with completely different backgrounds sharing only one thing in common: being a therapist in London. In particular, it outlines the relationship between client and therapist and describes how this relationship creates a sensitive and responsive atmosphere thus enabling any possible existing language barriers to be minimized (Shotter, 1993). In addition, the analysis of the data collected brought into focus various aspects of language in the therapeutic room, its role within the therapeutic relationship, as well as the impact of a client's bias and assumptions when having therapy with a non-native English speaker.

5.4- Limitations of this study

IPA was particularly useful for this study because it provides an apparatus for apprehending the experiences of participants and to communicate these experiences (Smith et al., 2009). Through the use of IPA, it was possible to achieve a deep sense of each participant's experience which included not only a narrative of their stories but also the meanings they attached to them. My interpretation of the results was informed by this deep understanding of their experience. Despite the need to be very cautious when generalizing results in an IPA study, which by definition tend to utilize only relatively small samples, the current findings have been consistent with existing research in the field.

Much criticism has been directed at IPA as a valid and reliable method of research. In fact, qualitative methods in general have been targeted because of an absence of measurable numbers. Perhaps, more than most, IPA has been attacked because it involves a creative process which requires quite flexible validity criteria. Furthermore, its detractors accused the method of not being scientific, phenomenological or theoretically grounded. In addition, it has also been criticized for a lack of generalizability because the sample sizes utilized are normally so small. Of greatest significance to critics though, is the fact that IPA is only considered capable of thematic analysis. It is also debated that IPA fails to acknowledge all constructive qualities of language in shaping individuals' experiences as well as that, instead of outlining our experiences, language imposes it (Burr, 2003; Willig, 2013).

One theme that emerged from the data was how comfortable and confident participants felt speaking English. This probably arises from the fact that many had been speaking the language for many years and some had also been trained as therapists in English, which might have considerably reduced the impact of being a non-native English speaker. Practicing in English seems to have given them confidence and have made them feel comfortable working in a second language.

Perhaps my exclusion criteria could have been more rigid and should have been restricted to participants who had actually been trained in a non-English speaking country. In other words, at this juncture, would the impact of a different language have been more evident in practitioners who had trained in their mother tongue and were now working in a second language?

However, it can be argued that practicing in a multicultural city such as London is less likely to have an impact on language because of the number of immigrants living there hence there will be less resistance from local native English speakers to accept foreign communities. Having said this, if similar research had been done in a smaller city or even in a rural area perhaps the findings would have shown a more significant impact of language on client-therapists relationships.

Due to my awareness of the impact that I, as a non-native English speaker, might have had on participants' accounts, the semi-structured interviews were deliberately conducted in a way that allowed natural and truthful accounts to emerge. In addition, I would maintain that a certain flexibility and sensitivity was utilized to ensure participants' accounts were not influenced, which also served to not impact emergent themes.

Given that it seemed likely that the impact of language in working as a non-native English speaking practitioner in London would decrease over time with increasing familiarity with English in therapeutic setting, the selection criteria recruited participant with a maximum of ten years' experience of practicing in London. Nevertheless, the selection criteria did not take into account the amount of time that participants had been living in an English speaker country or their overall experience of speaking English. The relevance of such circumstances became apparent in the course of the interview. Obviously, people who have been speaking English for many years will feel much more comfortable and confident speaking the

language than those who have only been speaking it on a daily basis for a few short years. This was evident on participants' accounts when they described English being like their mother tongue because of the number of years they had been speaking it.

Mearns and McLeod (1984) proposed qualitative research based on person-centred principles, thereby offering an effective basis for the collection of data. In addition, conscious and continuous effort was made to ensure that my interpretations of the data were reliable and grounded in the data. McLeod (2008) stated that the quality of data collected in qualitative research depends on the level of rapport and the quality of the relationship established between interviewer and interviewee. Participants are likely to have been aware of my own accent and my non-English name thereby allowing empathy to arise which enabled them to tell me their stories more openly and freely.

Smith et al. (2009) suggested that researchers need to be cautious with their closeness to the topic so as not to influence the data, avoiding issues regarding validity and reliability to be risen. Accordingly, researchers should aim to suspend any pre-existing understanding related to the subject especially as regards making sense of the world as recounted by participants. In order to achieve this, it is argued that researchers should keep a diary throughout the entire journey of researching, noting all pre-existing assumptions or bias prior to data collection, as well as during the process of analysis. The use of a diary in this research was indeed very helpful.

The analysis has attempted to achieve a genuine, authentic and realistic reflection on the participants' own words. For this reason, verbatim extracts are vital, allowing readers to compare participants' original accounts and researchers' interpretations, and therefore, reducing bias about the research method used (Smith and Osborn, 2008).

5.5- Suggestions for further research

Although the literature on cultural issues in therapy is vast and multidimensional, there appears to be a clear lack of research examining the actual role of language in the therapeutic room and how it might impact relational dynamics between therapist and client. Future research could consider the sample and the location where the study was conducted. However, as an alternative focus, perhaps future research could delimitate the area where participants practice or it could be carried out in a small English town or a rural area. Such a comparison would stand against the current study and perhaps very different results could be obtained.

The recruitment process selected participants with a maximum of ten years of practicing in a language that is not their mother tongue because of the possibility that the impact on language might be minimized over years of practice. The data supported such an effect. Further research could specifically focus on the number of years spent practicing and the participants' experience of the effect on language. The location and the language in which participants were trained seemed to determine their levels of comfort and confidence whilst speaking English. Future research could examine whether the language of training makes a difference.

A further alternative study could also be conducted including only participants who have been speaking English fluently or living in an English speaking country for less than ten years. In addition, in the course of this study, there is a dearth of information about the number of foreign practitioners working as therapists in London and the languages they speak. Maintaining a similar focus, it would be extremely helpful to somehow discover these figures and also to calculate

just how many languages are spoken by therapists in London. Therefore a quantitative study based on this topic could make an important contribution.

It would be valuable to find out what themes would emerge if research focused more on therapists' therapeutic approach was conducted. This issue was raised by one of the participants. Ayda stated that the importance of language differs in cognitively-based work and psychodynamic work:

“if you work cognitively, than language is ultra important. (...) Where if you work more on an emotional level... more with transference and countertransference... then you can be a bit more flexible” (Ayda:520-524),

Depending on the approach taken by the therapists, it is argued that different aspects concerning the impact of language would be noticed. Perhaps compared to relational therapists, therapists trained in traditional psychoanalytic approach would not be as open to explore with the clients any difficulties they might face in understanding some words.

Last, it would obviously be of great use to the community if this topic could be examined in different ways to enable further reflection on this most fascinating of subjects.

6- Final Considerations

6.1- Reflexivity

For IPA, it is important that researchers are able to be conscious, critically aware and reflective about the way in which their assumptions, questions, body language, biases, and subjective positions might affect the data that has been collected and on the knowledge produced by the findings (Langdridge, 2007). Throughout the whole process of doing this research, I have been aware that it would have been impractical to keep a neutral presence and to keep my subjective experiences completely out of the research encounter. However, in order to aim for this neutrality and to keep an awareness of any influence my own experiences might have had, reflective notes were recorded following each interview and continued throughout the whole research process.

Despite anticipating this difficulty regarding keeping a neutral position as a researcher based on the closeness of the subject with my own experience, I was surprised to realize from the first interview, how unique each participant's experience actually was. As fellow therapists, we might be able to relate to aspects of it but never to the whole. Furthermore, by being aware of my assumptions as regards those experiences, I feel I have been able to maintain a certain distance in the collection and analysis of the data. The semi-structured interview format also helped me to keep those assumptions at bay by allowing participants to speak freely and carefully using very open and non-directive questions.

Despite this, I feel comfortable disclosing that anxiety and even a touch of frustration affected me profoundly during the process of doing this research. In particular, my anxiety revolved around the fact that participants seemed unable to

focus on the subject and found difficult separating language from cultural issues (which at the beginning of this study seemed an easy enough task, although in hindsight, perhaps my easy understanding of the concepts arose from my literature review and my own interest in the subject area).

So perhaps, to the layman, it is indeed, very difficult to consider the impact of language outside the cultural arena. Nonetheless, as the interview process progressed, I did wonder whether I would get enough data to reach a conclusion. Furthermore, I found it particularly difficult to only focus on comments relating to language, completely ignoring valuable accounts of participants connected to cultural experiences rather than to the language aspect of relating to clients and being non-native English speakers.

Another interesting aspect of this process was that very often participants would talk about their clients rather than themselves. As such, I discovered that exploring their feelings regarding the experience of being non-native English speakers working as therapists in London was not as easy as I anticipated. On occasions I even wondered whether participants were, unconsciously or not, avoiding focusing deeply on their experiences to evade raising some strong feelings that perhaps even they were unaware of.

It is true that, whilst talking to participants about how they felt being non-native English speakers working in London, I did question many times how aware of their feelings they were, as it intrigued me that their experience did not seem to affect them the way it had affected me. I was, in fact, amazed that some participants spoke English so comfortably despite having such strong accents – so much so, that I often couldn't understand their responses and I had to ask them to repeat themselves again. Coincidentally or not, it was only on the last interview I conducted that the clouds

parted and the dark sky transformed into a harmonious light blue that I suddenly saw things clearer.

When Giulia said to me:

I don't give myself a hard time. Hmmm... I used to when I began... hmmm... and I don't anymore. So, it is maybe the main issue for me is how perfectionist I am and how I... I would like... to be this... hmmm... this sophisticated bilingual person.” (Giulia:197-200),

I began to wonder if participants were unconsciously in denial of their feelings. In hindsight, I now realise they probably were not, and that my doubts revolved around concerns that their experiences stood in stark contrast to my own. Like Giulia, I have always been a perfectionist and as result have faced challenges throughout my whole training as a therapist. Perhaps this is why I have always considered therapy to be my calling, so I could learn to accept that I can never be perfect because there is no such thing as perfection.

For the longest time, I have been conscious of my English and the way I speak the language. Indeed, I will never forget my first English speaking client, (who was actually my first native English speaking client as well), after counselling many clients in my mother tongue. I wondered whether I would be able to understand the client fully. I wondered whether the client would feel understood, or would judge my competence based on my ability to speak English, something I widely explored in my supervision. It is pointless to describe my relief and satisfaction when I managed to establish a powerful and meaningful connection with this client; indeed we were both very pleased with the therapeutic outcomes.

Collecting data was a joyful and extremely pleasant part of this study. Each encounter changed my views in a different way, and I was especially lucky to have,

coincidentally, such a diverse sample. Listening to participants' stories and getting to know their personal and professional values, excited, inspired, and motivated me greatly. The transcription of the tapes sometimes felt like an endless chore, and my perfectionism made me work harder as I refused to miss a pause, a comma, or even a deep breath. As such, I spent long hours trying to understand a couple of missed words and would only give up with a resigned 'inaudible' inside, whenever all my other resources were exhausted.

Whenever these inaudible words came up, my frustration soared and I felt occasionally lessened. Then a parallel process of understanding the dynamics between a client and therapist when words are not understood started to take shape, allowing a deeper reflection of my participants' accounts and in fact, even allowing me to actually relate to some of them. In these cases, I could suddenly see when it was irrelevant to the context to understand a single word or when it needed to be further explored. The majority of the words I found inaudible probably made no difference, but admittedly, there were almost certainly a few that perhaps could have.

When I finally finished transcribing all interviews, I found I had reached an impasse and I felt stuck. Moreover, the first steps of the analysis process were exhaustive, which increased my feelings of being overwhelmed, perhaps due in part to difficult personal circumstances I was going through at that time. However, when I reached step 5 of the analysis, my interest rekindled and my enthusiasm started to return. Seeing all recurrent themes emerging and repeating across participants was nothing short of stimulating. The second table, specially, revealed a tremendous amount of pertinent from my interviews. For me, it felt like unwrapping the present and: "Wow, it was so fascinating!" However, this flurry of revelations also led to more challenges as I had to find a way to cluster the many themes and sub-themes that emerged whilst discerning their significance.

From this point onward, the work flew ahead and it was all I could do to contain my excitement and turn my ideas into words on the page. As it was expected, these ideas all came to me in English, although by relating to my participants' experiences, I can account for this phenomenon with the sub-theme, 'creating emotional distance or closeness'. In other words, because my data was compiled in English and the literature I had been reading was also all in English, I suppose I felt closer to the language than I ever felt, hence my ideas flowed in English. Having taken so much time and effort to transcribe and understand their stories, I felt it a great shame not to be able to use some of my participants' curious experiences simply because they did not repeat across the interviews. However, I am reassured by the fact that, despite being unable to add to the existing literature in the field with these singular accounts, they at least added to my knowledge as a person and as a practitioner.

Part of my reflective process especially caught my attention. Having completed the participants' theme tables and whilst in the process of analyzing the emergent themes, I noticed that it came up to me as a master theme the advantage of being a non-native English speaker, or what I eventually named 'special resource'. Despite the fact most participants pointed out an experience they would consider a disadvantage (such as their accent or judgmental client), this was not analyzed by me as a master theme. Instead, I made the decision to include this data as sub-themes of other master themes. However, having reached this decision, I then wondered if my personal experience and my unconscious wish to prioritize what I deemed advantages actually clouded my judgment.

As a result, I kept my epistemological position firmly in mind throughout the rest of my journey, a position which I believe has been fundamental to its success. Furthermore, although I am certain my interpretation of the data is unique, I hope

however my master themes and sub-themes will be easily understood and accepted by colleagues who are familiar with IPA because as all researchers know, subjective interpretation of participants' accounts must still clearly reveal the genesis of ideas, or in this case, where my master themes and sub-themes originated. This, I contend, is what I have achieved in my research.

6.2- Personal Post-Script

This is the first qualitative study investigating the lived experience of non-native English speaking therapists working in London. Through the use of Interpretative Phenomenological Analysis it was found that the participants do not currently experience major language issues in their therapeutic relationships, despite some acknowledging self-consciousness as regards their accents and their ability to speak fluent English at the beginning of their practice. However, it could be argued that this concern about language proficiency and accent had more to do with their inexperience as practitioners than with their relationship with clients.

I believe that my experience with living my life multilingually, I mean, living in an English speaking country, being surrounded by Brazilian friends speaking my mother tongue and offering therapy also in Spanish and Italian enabled me to be more aware of linguistic subtleties that can, eventually, lead to misunderstandings. In conclusion, it is argued that this study generated several valuable findings which support existing research but also provides another insight about the topic. For example, the relevance of some words and expressions which are eventually lost in communication often occurs without acknowledgement and recognition.

Indeed, in many cases, participants revealed their unawareness of the topic prior to the interview and expressed enthusiasm for learning more about it. Thus, if

prior to this research I already believed in the importance of studying language in the therapeutic room, having completed my work, I now strongly advocate for an open exploration of this topic, in the hopes of revealing and engaging with the layers of resistance this subject can evoke. In particular, it is contended such research reminds us of the importance of being mindful of the differences in therapy, both the evident ones and the ones we barely see. It was also important to provide the interviewees with an opportunity to reflect about their practice and I hope it will have done the same for the readers by now.

A significant part of the learning I have gained on this journey is linked with my personal as well as professional growth. The process of conducting this research not only changed my views and perceptions of language, but beyond that, through IPA, it allowed me to appreciate the beauty of the uniqueness of each individual's experience. This study has also been about who participants really are, how they feel about who they are, how they see themselves and how their experiences impact on their perceived place within society. It was very touching and it meant a lot to me to hear from one of my participants:

“the language... forms who we are. It... it's... hmmm... it's a formative experience” (Giulia:224-225).

The above is only one of the passages that affected me deeply, encouraging me to further reflect and re-analyse my pre-conceptions. Together, these passages represent my contribution to the field because they reflect many unique encounters and my, hopefully unique, interpretations of those participants' accounts of their experiences. Nevertheless, I contend that this study represents an encountering of souls coming from completely opposite parts of the world, meeting in a common place and walking on similar paths towards the same goal: to understand more about human connection, differences, relationships and encounters. I must also add that this

unexpected journey of personal growth, learning and unlearning old ways of thinking has been enriching and fulfilling. There have been moments of inspiration, excitement, exhaustion and utter despair. As mentioned in the introduction, my closeness with the topic of this study emanates, in some aspects, from my own quest to make sense of my own experiences and to learn how they formed the person I am today.

Although McLeod (2008) stated that “the essence of the phenomenon can never be grasped” (p.86), the search for this essence has enabled at least one researcher to somehow make sense of and to find meanings through which the phenomenon was constructed. Therefore, rather than drawing any conclusive results of the experience of non-native English speakers working in London, it is hoped that instead this study will open up a wider range of other possibilities to further reflect and discuss about this topic by providing an opportunity for other therapists to identify here elements of their own experiences of being non-native English speakers working in London. As recently elucidated by Iannaco (2014), there is still much room for further reflection and research around the impact of language in the therapy room, which we can only hope will lead to continuing exploration of this subject.

After many months of interviews, analysis and conclusions, I finally sat down to write my final words. Many times I did this, and many times the words failed to materialize. Unable to find the right words and the inspirational sentences I was seeking, I was missing the confidence that nothing else was missing. Today, here I am again, sitting down on the same chair and having the same doubts. But today I am not missing the right words, instead, I have too many words to describe the knowledge I have acquired during each step of this momentous journey.

So much so, I feel satisfied with the job done here. I have taken great pains to acknowledge the authors of similar studies for their findings and rich discussions and

hope that this study too will instigate reflection. Here then, I finalize this work but I must admit I will consider it incomplete until the next researcher comes along and after reading it, feels inspired to continue studying this topic because surely a work is only truly complete when the seeds it plants start to germinate in the work of others.

The Cool Web

by Robert Graves

(1895-1985)

Children are dumb to say how hot the day is,

How hot the scent is of the summer rose,

How dreadful the black wastes of evening sky,

How dreadful the tall soliers drulling by,

But we have speech, to chill the angry day,

And speech, to dull the roses's cruel scent,

We spell away the overhanging night,

We spell away the soldiers and the fright.

There's a cool web of language winds us in,

Retreat from too much joy or too much fear:

We grow sea-green at last and coldly die

In brininess and volubility.

But if we let our tongues lose self-possession,

Throwing off language and its watery clasp

Before our death, instead of when death comes,

Facing the wide glare of the children's day,

Facing the rose, the dark sky and the drums,

We shall go mad, no doubt, and die that way.

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Appendices:

Appendix 1: Ethical Approval

Fw: Ethics Application Ref: PSYC 13/ 108

Thais Roscia (Research Student) (rosclat@roehampton.ac.uk)

From: Jan Harrison

Sent: 06 February 2014 08:45

To: Thais Roscia (Research Student)

Cc: Lance Slade; Anastasios Gaitanidis

Subject: Ethics Application Ref: PSYC 13/ 108

Dear Thais,

Ethics Application

Applicant:

Title:

Reference:

Department:

Thais Roscia
The experience of being a non-native English speaker
working as a therapist in London
PSYC 13/ 108
Psychology

Many thanks for your quick response and the amended document. I am pleased to confirm that all conditions for approval of this project have now been met. We do not require anything further in relation to this application.

Please note that on a standalone page or appendix the following phrase should be included in your thesis:

The research for this project was submitted for ethics consideration under the reference PSYC 13/ 108 in the Department of Psychology and was approved under the procedures of the University of Roehampton's Ethics Committee on 06.02.14.

Please advise us if there are any changes to the research during the life of the project. Minor changes can be advised using the Minor Amendments Form on the Ethics Website, but substantial changes may require a new application to be submitted.

Many thanks,

Jan

Jan Harrison

Ethics Officer, Research Office, Academic Enhancement Department

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Consider the environment. Please don't print this e-mail unless you really need to.

Appendix 2: Recruit of Participants Advertisement



Recruiting BACP or UKCP non-native English-Speakers counsellors working for minimum 1 year and maximum 10 years in London

Cultural issues in the counselling room constitute a widely researched subject in the literature. Although culture and language are very much intertwined, more attention needs to be paid to language differences and how they impact on the therapeutic process and on the therapist-client relationship. This doctoral research will provide an exploratory in-depth understanding of the experience of being a non-native English speaking therapist in London.



If you are a qualified counsellor (BACP or UKCP), non-native English speaker and have more than 60 hours of English speaking clients, your contribution is very much appreciated.

One-to-one interviews will take approximately one hour and a half, at a time and place convenient for you. If you feel you can participate on this study please contact Thais Roscia

on:

Rosciat@roehampton.ac.uk or 075xx xxxx04

Thank you very much

Appendix 3: Participant Consent Form



PARTICIPANT CONSENT FORM

Title of Research Project:

The experience of being a non-native English speaker working as a therapist in London

Brief Description of Research Project:

Cultural issues in the counselling room constitute a widely researched subject in the literature. Although culture and language are very much intertwined, more attention needs to be paid to language differences and how they impact on the therapeutic process and on the therapist-client relationship. This doctoral research will provide an exploratory in-depth understanding of the experience of being a non-native English speaking therapist in London.

Interviews:

The research will involve 10-12 qualified counsellors (BACP or UKCP). Semi-structured interviews will last 60-90 minutes and will take place at a convenient time and place for the participant, ideally at his place of work. Interviews will be recorded and transcribed verbatim for the researcher's analysis. The researcher will ensure that any identifying data of the participant such as name, contact details, job function and geographical location will be altered so as to remain unidentifiable and anonymous.

Investigator Contact Details:

Thais P. Clemente Roscia
Department of Psychology
University of Roehampton
Holybourne Avenue
London, SW15 4JD
Email: rosciat@roehampton.ac.uk
Tel: +44 7525821904

Consent Statement:

I agree to take part in this research, and am aware that I am free to withdraw at any time, **before the analysis of data is finalized**. I understand that although the information that I provide will be treated with strictest confidence, if anything is

disclosed during the interviews that indicates a risk of serious harm then the relevant organisations may need to be informed. I understand that my identity will be protected in the publication of any findings.

Name

Signature

Date

Please note: if you have a concern about any aspect of your participation or any other queries please raise this with the investigator (contact details mentioned above). However if you would like to contact an independent party please contact please contact the Head of Department, or if the researcher is a student you can also contact the Director of Studies.

**Head of Psychology Department:
Dr Diane Bray, Head of Department**

Department of Psychology
University of Roehampton
Holybourne Avenue
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Email: D.Bray@roehampton.ac.uk
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Dr Anastasios Gaitanidis, DoS**

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Tel.: 020 8392 3000 ext.4529

Appendix 4: Debriefing Form



DEBRIEFING FORM

The experience of being a non-native English speaker working as a therapist in

London

Thank you very much for making this study possible.

This study has provided an exploratory in-depth understanding of the experience of being a non-native English speaking psychotherapist in London. Despite the fact that counselling involves verbal and non-verbal communication, it is essentially based on therapist and client talking to each other. Although the literature has largely explored cultural issues in the counselling room, more attention needed to be paid to language differences and how they impact on the therapeutic process and on the therapist-client relationship. I aimed to focus closely on language in order to understand its importance in counselling, highlighting the challenges, if any, involved in this process. This research aimed to investigate how non-native English speakers understand and make sense of their experience as clinical practitioners.

Sources of comfort and help

Talking and reflecting about your experiences may have raised feelings which you were not aware of before. This might bring some sadness or upset which is expectable and will hopefully pass within a few days with the support of your family, friends and other people close to you. However, if these feelings persist it is advisable to talk to your therapist, if you have one, or your supervisor.

You are welcome to contact me again to discuss any aspect of your participation in this study, to share any concerns you might have or to ask questions.

Thais Roscia
Department of Psychology
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If you feel that your participation in this study have caused any emotional distress and you are currently not in therapy or supervision, you will find below a list of organizations you may also contact for emotional support:

British Association for Counselling and Psychotherapy (BACP)

South London Counselling Directory, your local guide to confidential support

w: www.itsgoodtotalk.org.uk/therapists

Inner City Centre

Low cost Counselling/Psychotherapy in the City and throughout London.

t: 020 7247 1589

e: referrals@icclondon.org.uk

w: www.icclondon.org.uk/

NAFSIYAT Intercultural Therapy

Therapists from different ethnic backgrounds; some counselling in languages other than English.

Unit 4, Clifton House, 42/43 Clifton Terrace, N4 3JP

t: 020 7263 6947

e: admin@nafsiyat.org.uk

w: www.nafsiyat.org.uk

United Kingdom Council for Psychotherapy (UKCP)

w: www.psychotherapy.org.uk

Waterloo Community Counselling

Low-cost counselling on a sliding scale according to income, from £10 per session. Free Multi-Ethnic Counselling in a range of languages for refugees and asylum-seekers and members of BME communities.

Barley Mow Clinic, Frazier St. SE1 7BD

t: 020 7928 3462

e: info@waterloocc.co.uk

w: www.waterloocc.co.uk

Appendix 5: Interview Schedule

The following questions were scheduled to be asked to participants:

- 1- Can you please tell me your age, nationality and first language?
- 2- How many years have you been practicing as a counsellor for? And how many years have you been practicing in English for?
- 3- How many years have you been speaking English for?
- 4- Do you speak any other language rather than your own and English?
Which ones are they?
- 5- Could you please provide me with a history of your experience and perceptions of your work with native English speakers?
- 6- Could you please provide me with a history of your experience when working in English with non-native English speakers?
- 7- Could you please provide me with a history of your experience when working with clients who have the same mother tongue as you?
- 8- How do you understand the role of the language you speak in the therapeutic process?
- 9- Do you think there is any advantage or disadvantage of being non-native English practitioner working in London?
- 10- How does it feel for you to be a non-native English therapist working in London?

Appendix 6: Analysis Interview Participant 10

<p style="text-align: center;">PARTICIPANT 10</p> <p style="text-align: center;">(Giulia)</p>			
<p>Emergent themes:</p> <p>Initial emergent themes where it was used strikethrough text for all overlapping or repetitive ones</p>	<p>Line:</p> <p>Refers to the line correspondent in the original transcript</p>	<p>Original transcript where:</p> <p>-Red sentences refers to interviewer's comments -[...] refers to editorial elision where non-relevant material has been eliminated -... refers to a pause in the participant's account -Bold is used to highlight words or extracts that I found key to understand the participant's experience -*** refers to anonymised information</p>	<p>Exploratory Comments:</p> <p>Descriptive in pink Linguistic in blue Conceptual in green</p>
	1-27	[...] [...]	
	28-30	Can you please provide with the history of your experience and perceptions of the work you do with native English speakers, with people who have English as their first language?	
	31-36	[...] [...]	
<p>Therapist's ability and fluency in English might depend on having trained in this particular language</p>	37-44	<p>Oh! It's a lot better than in Italian. I don't... I can't actually... (laughs) I've trained here so, everything that I know as a psychotherapist... all the technical terms, the labelling... you know... everything I have recorded in English. So, when I speak English I can fluently express myself rather than in my own</p>	<p>Because she was trained as a psychotherapist in English, for her to have English speaking client is easier than to have clients in her mother tongue.</p>

Therapist's therapeutic vocabulary is in English		native language. Actually when I say... when I need to explain... I don't know... the drama triangle or... make interventions or... talk about the critical self... you know... all kind of things that I do, I don't know it in Italian , so I say that in English. Even if I... if I'm... So it's very easy. It's a lot easier to work with native English people.	
	45	How do you understand the role of the language you speak in the therapeutic process?	
Language is very important	46-49	I understand it as... the main tool I have... to enable the client to process... his own life and his own thoughts... and feelings. So it is very, very important. Hmmm... the better I express myself the clearer is the work for the client. Hmmm... so language is... essential, is very important. I don't know what else you're looking for, if... Does this answer the question?	Language is the main tool for communication between client and therapist. It is essential.
Language is the main tool for communication			
It's essential to be fluent			
	50	Can you say a bit more about that?	
More than words	51-57	Well... hmmm... I work a lot with non-speech, with non-verbal expressions. So a lot of body work. And sometimes I find that more powerful than speaking. So, it is in the gaze, in the way I hold the client in my gaze, the way I would maybe come close with my chair and put one hand on their knee, etc, etc. With some	More than language. Non-verbal language. The connection.

The emotional connection of the language		people that is extremely healing in the therapeutic. But for other people that is too much. So, it is the language that enables me to get close to them and for them to feel accepted and accepting of themselves . So it's... yeah, it is a very powerful tool in that sense. And I am not sure if I am so good in that, myself.	
	58	Can you say a little bit more about that?	
It's an advantage being a foreigner therapist working in London	69-64	Because I feel my strength is very much in therapeutic touch and the agent for change, especially in a country where culturally, there is very little touch and very little... hmmm... intimacy. And I'm not talking about sexual intimacy, you know... human intimacy. And so... hmmm... that is my advantage being an Italian therapist where I know when the language sometimes can be... a hindrance to someone getting more grounded or more embodied in their feelings . Hmmm... but for some people it's the only way I can work.	She considers an advantage to be a foreigner therapist working in London. Based on what she is saying it seems that she values more non-verbal than verbal communication in the room. Language can be a barrier. Language can impede or get in the way of client's development.
Language as a hiding place			
Therapists need to understand better than they speak a language	64-70	So I try to use very, very specific words or... very short sentences rather than going on and on and on, you know this... And I also have a lot of ideas about how the therapist often does the work for the client, because it is all about their ego. And it is about... there isn't a real leveling and balance between the client and the therapist whereas for me the job is for the client to actually do the work and for me to make as little interventions as I can . So, the words I use, the sentences I use are extremely	She sounds very confident about what she is talking about. Therapists don't need to talk much.

		short and simple and often they don't understand me and so then...	
Not knowing as an opportunity to know more	70-72	I get more information because of the fact that they don't understand me. And that will then... it's... it's a... it is a way which we can talk a lot about that.	She gets to no more when a client does not understand her.
	73-74	When you say they don't understand me, what you mean by that? Can you give me an example?	
Meaning of words	75-82	So, for example I would say: "How do you know that you are happy today?" And they would go like: "What do you mean?" So, it's not about the language, it's about what I mean by those very simple words. Or I would say: "How do you do that?" So, they say to me: "I haven't been feelings so suicidal for the last two weeks." So I say: "How did you do that?" And they say: "What?" "What do you mean by that?" So I explain: "You mustn't do something and you must have packed certain critical thoughts on one side and you must have focused on something that has been positive for you." "Are you aware of that and if you are aware of that, how did you do that?" And that's very interesting for them. Yeah.	Clients might understand the words but might be puzzled by the meaning of them.
	83-84	Can you provide me with the history of your experience working in English with non-native-English speakers, for example working with a Polish speaking client?	

It's an advantage to be non-native English speaker working in London	85-93	I would say that the majority of my clients are foreigners. I think... you know... if you came to **** website, they are all English. I'm the only one that isn't. So, I attract lot of foreigners and I have to say that it's a real advantage because they can hear my accent. I have an accent. I speak very good English but I have an accent. They really relate to the fact that somebody actually can... go to school, university, get a degree, get training and be in a position of a therapist. A lot of them like a lot. So, for example two of my clients, one is French, one is Colombian, they want to become therapists just inspired by the fact that I am a foreigner, I did the training and I am doing what I'm doing. So, I think it is an advantage and I like it. Yeah.	Her speech is very precise and her ideas very organized. Advantage. Non-native English speaker therapists might attract many foreigner clients. Clients feel inspired by a foreigner therapist who succeeded in studying and becoming a professional in London. Her accent identifies her as a foreigner.
Offering something else			
Being an inspiration			
Self- awareness regarding her accent			
	94-96	In terms of the language you speak in the room with them, can say a bit more about what happens in the room when you are speaking your second language and they are speaking their second language? What do you perceive of the work you do, of the language you speak?	
Second language as an extra tool/ Offering something else	97-103	I think we both, the client and myself, are aware of that. That it's not our native language. Hmmm... I think perhaps for me it brings... it puts awareness on the fact that... hmmm... It is a little bit like being on a performance... rather than with an English person, because with them that is all they know. But with a non-native speaker , English speaker that is like... I don't know how to say this... it's very much like... It is an extra	Speaking a second language is an extra resource for both therapist and client.

		gear for both of us. It's something that you access in the way we communicate. But at the same time there is always a second thought that says... in my mind it says: "I wish I could say this in a different way".	
	104-105	You used the word 'performance', what do you mean by that? Can you explain it a little bit more?	
Different perception of self	106-109	Well, it is a... hmmm... I can hear myself when I speak English... always. So that to me is like having another (inaudible)... when I am speaking. I perceive myself in a different way when I am speaking Italian than I am speaking English. And I imagine that it is the same for the other person.	Her hesitation is very brief. She sees herself differently according to the language she is speaking.
	110	Can you say more about that, about the way you perceive yourself in both languages?	
Connecting language with the moment in life	111-112	When I speak English I'm definitely... the mature... more adult self. When I speak Italian I am much more the playful younger person that I left in Rome... twenty eight years ago.	She connects language with different periods of her life.
	113	Why do you think is that?	
Connecting language with the moment in life	114-116	Because I grew up there...and I... developed my skills as an adult... in this country. So my language is definitely much more refined and much more... hmmm... hmmm... well I... the only word that comes is adult... in English than... than... and not in Italian. So...yeah, yeah.	Based on her hesitation I sense that she really tries to find a better word to describe her experience but fails in doing so. An adult language in English because it's where she had adult experiences.
	117-118	Can you provide me with the history of your experience when working with clients who	

		have the same mother tongue as you?	
Untranslatable	119-122	It is very, very, challenging for me. Hmmmm... it begins with... the fact that in Italian, you have... hmmmm... the third singular... the third person in singular... and the second... person in singular. So, you... so, that in English does not exist , yeah. So... hmmmm... it begins with that.	What pronoun she should use? She wonders about the choice of the right pronoun.
	122-125	Do I speak to a younger person, younger than me... hmmmm... saying you, as you, or “lei” yeah? Hmmmm... and if I do do that, how does the client respond to me? Am I too informal, am I too friendly , am I this and am I that? And I have... and I have played... all different scenarios and have used and I’ve experimented on that.	Doubts regarding the words she should use and how they might impact on her relationship with the client.
Meaning behind a word	125-128	And I’ve noticed that... if I start with giving ‘you’ as ‘tu’... hmmmm... there is a certain relationship that begins on a certain level... which is ... so... hmmmm... so... I am... There is less of a professional distance... from my side and for them there is a sort of a certain sense of... hmmmm... I don’t need to work.	The choice of the pronoun to use impact on the relationship she builds with the client. She talks about the meaning behind the pronoun she chooses to use.
Creating a distance with language			
Meaning behind a word	128-136	I think the work is not done... in the most... hmmmm... appropriate... hmmmm... not appropriate... it’s... hmmmm... it’s as if the client did not take himself or herself as seriously. Because by giving the ‘lei’, so the more formal ‘lei’... hmmmm... they are much more in... they’re taking themselves more seriously. I’m paying all this money to come to talk about myself and this is not my friend. I am not	She continues talking about the meaning behind the pronoun she chooses to use and how she thinks it might impact on her relationship with the client.

		<p>a friend. I am a person that can guide them... and... hmmm...help them... find different ways of behaving in their lives... that are going to be more satisfying for them. Which is my goal. So, that's one... that's one... difficulty I have. And now I actually... And now... I go with 'lei'. I go with 'Lei', yes.</p>	
Relationship dictated by how language is used	136-141	<p>And they ask me... hmmm... eventually we talk about it and sometimes they say to me: "You can... you can say 'tu'". Because they are younger than me. So then, if we have a conversation about that... then I say: "Fine if you feel more... comfortable with me using 'tu'", I'll do that...and they still call me, they still refer to me as 'lei'. So at least there is... that's a very, actually, nice way of relating to one another and... hmmm... establishing the... the...the relationship. Yeah.</p>	Relationship with the client established by the language they use.
Choosing the right words			
	142	Can you say more about the challenge? You said it is very challenging.	
Training as a therapist in English	143-147	<p>Yes. Well, as I say, I... I... the first thing that I say in my contract, even in my letter is: "I am Italian, I am one hundred percent able to... I am...there to understand in your own native... native language, and I have been here for such a long time... and my training has all been in English... and I speak English every day with my... you know... my husband, with my friends... hmmm...</p>	She has done her training as a psychotherapist in English.
Switching languages	147-151	<p>...that I will use... English when I... miss or lack... that word in Italian. So... often I would say, I would speak to</p>	She uses English words when counselling in Italian in case she can't

		them in Italian and then...when something doesn't come up quite of quickly, I would say it in English. And I explain that, and I ask them if they're ok... And they're all ok with that. Because actually they have a similar... similar... experience themselves.	remember how to say a word in Italian.
Interrupting the flow of the session	151-153	Hmmm... I don't like it... because it interrupts my flow. I don't like when... I am speaking in my own language and I can't find the word. And then it distract myself from... the trajectory I'm on.	Cutting off. If she can't remember a word, it distracts her; it moves her away from the client's issue.
Limitations cased by lack of fluency			
	154	Can you say more about that?	
Competence	155-156	Well, it's... hmmm...I don't like taking away... my attention from the work that the client is doing, just because I am lacking that word. I feel lessened.	Lacking words. Limited vocabulary. Feeling unskilled.
Limitations cased by lack of fluency			
	157	Can you say more about "I don't like"? What it means for you? How do you feel?	
Slower pace for the session	158-159	Hmmm... (Long pause) I feel... I feel disappointed at myself. I feel sad about that. It would... I would like it to be... to flow. I would like the Italian to flow more.	When there is not fluency, the flow of the session is different.
Lack of understanding	159-161	And I thought about that a lot... and I thought about maybe coming with a glossary of the words that I...often come up against.	Looking for words.
Untranslatable	161-164	So, one word is boundaries. I always talk about how we make boundaries for ourselves. And in Italian it sounds... hideous. And so also finding maybe translating the word... in a way that... it actually sounds and is... effective and useful for the client. I don't	When she translates the word into Italian it doesn't sound right or make that much sense.

		know if I explained that.	
	165-166	Can you say more about that? You were saying that the word, for example, the word 'boundaries' if you translate to Italian it doesn't mean the same thing.	
	167-169	Hmmm... It means... So... hmmm... I am sure... that if I had... if I had another training in Italian, I would know what term they use in Italy... for that same... word that I use every day, and that the person would understand me immediately.	She's talking the therapeutic terms which she knows better in English because she trained as a psychotherapist in English. Therapeutic vocabulary.
Limitations caused by lack of fluency	169-174	Whereas I have to explain it... so I go with metaphors, or I would say: "this means this". So I would say it in English: "So, the word is boundary". And if they don't understand it... I'd say: "well, it is like this". And... hmmm... And that interrupts the flow. Because that is like another pocket of... thinking around the use of that language and how that applies to the therapeutic work. And it takes away the attention of the client... and mine, in fact.	The search for the right word, the lack of vocabulary interrupts the flow of the session. Causing distraction.
Slower pace for the session			
	175-176	Can you say more about this interruption you were saying? How do you feel about it? What do you think happens in the relationship?	
Relating with the other	177-180	Hmmm... well... many things... that... can happen. Hmmm... I think it maybe... it can be very, very even more intimate... it can make the relationship more intimate.	Her hesitations mean a deeper reflection. Getting closer to the other. Relating with the other. Similarities.

Deepening the relationship		Because is the sense of... I am struggling with something and therefore, I am as human as you are... person that, sitting...sitting there. So... I like that fact.	
Competence	180-182	It can mean...hmmm..."Oh! She doesn't know the word! Does that mean that she doesn't... she is not a good enough therapist?" And... you know, there might be clients... that think in that way.	Doubting her professional competence based on her lack of fluency.
Being honest and authentic	182-186	Hmmm... which is why I explain it at the beginning of my contract that this is one... one of the difficulties I have in... delivering my work in Italian. Hmmm... I imagine there is this compassion... as well... towards... hmmm...towards me... and compassion towards them as well because they have to be patient... they have to be more patient.	She speaks slowly using pauses which gives a more assertive sense to what she is saying. Being open and transparent with clients.
	187	Can you say more about compassion?	
Relating with the other	188-192	Hmmm... it... it... hmmm.... I'm sure that the client has been in my place many times... in living in this... in a foreign city. And that teaches them how to be... compassioned towards themselves... when they are... out there in their lives. So a lot of people would say..."Yes, but I don't make phone calls because my English is not good enough." And with this... they learn: "It's ok! You know, it is not the end of the world".	Clients that went through similar experiences. Relating with the client.
Clarifying doubts	192-195	Hmmm... someone at the other end of the phone will understand you. And if they don't understand you, they would say in fact, as you are saying to me: " What do you	If a client does not understand something she says, they just ask for clarification.

		mean by that?" So, it is fine. Yeah, that's what I mean about compassion.	
	196	So, what else? What else do you think it happens? When you can't find the words...	
Lack of understanding	197	When I can't find the words... (long pause)... I'm very gentle on myself.	When she lacks vocabulary and cannot find the right word to say.
Confidence comes with time	197-198	So, I don't give myself a hard time. Hmmm... I used to when I began... hmmm... and I don't anymore.	At the beginning she used to give her a hard time for not finding the words to say. After years of practicing now she got used to not having the words and realised that it is ok not to have them.
From a humble position	198-204	So, it is maybe the main issue for me is how perfectionist I am and how I... I would like... to be this... hmmm... this sophisticated bilingual person. And when I hit this moments in me I realize that I am not that perfect. So it's very humbling as well . Hmmm... yeah, humbling and at times frustrating. But less and less the frustration is there with me. It's more about... "Well, ok... that's another..." I come back to me and say: "Oh, Ok. That's another word for me to look at... and... hmmm... and work on". Hmmm... Yeah.	It's about her confidence and what she expects from herself. Learning new words.
It's about confidence			
	205-206	[...] [...]	
	207-208	You just offer therapy in Italian and English but you said that you speak fluently other languages?	

It's about confidence	209-210	Yeah, I know that, when for example: other clients, I'm sorry, other colleagues say: "We have... a client from... a country... that you know ***." I just say: "Yeah, I can talk to them". It's never been... it has never been an issue of... So, what I want to say is that nobody comes here with the intent...with a need of a translator, yeah. And... hmmm... if there is a Portuguese person for instance, or a Brazilian person, because I can speak the language... not really fluently, but I... that used to be my second language before I learned English... hmmm...I can certainly have a conversation with them. Hmmm... and I do not find... It wouldn't be appropriate for me to say: "I can speak Portuguese and do therapy in Portuguese". So, I... I know my limitations... and I don't go there.	Although Portuguese used to be her second language and she spoke it for many years she doesn't feel confident to say that she is fluent enough to offer therapy in this language. Limitations of the fluency, own limitations related to the language.
Limitations of the language			
Knowing our limitations			
Switching languages	217-221	But if somebody, if... if... I haven't had a Brazilian person... actually ever. So... hmmm... I... hmmm... I could say... I could work with that person. And I could say: "Listen, my Portuguese is very limited... but if you know, if you have a good knowledge of English, together with the English we could do it. "	She offered to the client to speak Portuguese but using English as well for words she might not find in Portuguese. From one language to another. Speaking two languages in the room.
Preference in speaking the same language	221-222	Because what they say, mostly what people say is: " It's important to me to speak my own language when I do therapy". Definitely that is the feedback I have from the Italian people.	Clients prefer to have therapy in their first language.
	223	Do you know why?	

Close to home	224-225	Yeah, I mean that is the nearest to home that we can get . In their hearts, in their... it... it's the language... forms who we are . It... it's... hmmm... it's a formative experience .	Speaking their other tongue make them feel at home, or feel closer to home.
	226	Can you say more about that?	
Representing who we are	227-229	Hmmm... hmmm... I know that... the way I experience myself when I speak in Italian... hmmm... has formed me and shaped me in the person that I am. By... by that I mean... hmmm... It's a difficult concept actually... to explain.	Her hesitations mean reflection here. The language forms who we are.
Different ingredients	229-234	But I know that... hmmm... the musicality of the language , the... the... the... sort of the way that the language pitches up and down, high or lower... hmmm... hmmm... the construction of the sentence... hmmm... that is very different in English... for example... hmmm... the use of the... of adjectives that come after not before the... the... the noun. Hmmm... in that way, I have... I am... I have been shaping and I have shaped myself since child... childhood.	Different parts that form or shape language. How.
Representing who we are	234-236	Hmmm... I don't know how to explain this very well but I definitely know that... I... I am who I am because of the way I have... because of my language .	Language forming who we are. Complex concept. In what terms? Culturally?
	237-239	[...] [...]	
	240-243	How do you make sense of all this? Because you said that the language makes the person you are, shaped the person you are. How do you make sense of being an Italian native speaker working in London? How do	

		you make sense of being a non-native English speaker working in London?	
Another pair of glasses/ A different perspective	244-245	Hmmm... I think I have another pair of glasses . So I've... I have an extra pair of lenses... hmmm... and that... it's an advantage.	Interesting analogy! As if she can see it from a different perspective. A different point of view.
Sensitive to differences	245-248	I see it as... hmmm... (long pause) I see it as being more intuitive and more sensitive to... differences . Hmmm... I... Hmmm... (long pause). So, for example: as an Italian, that is something that I can... tell you... hmmm... quite... concretely is that... Italians use a lot of gesticulations when they speak.	Being more sensitive to the differences.
Non-verbal	248-257	Hmmm... So everything that is in the realm of... facial expressions... usage of hands, and feet, and body , I use in my therapy... therapeutic work. Things that English people have no idea of. Because they... they very rarely use their body when they speak. Hmmm... and that's an advantage. Hmmm... hmmm... There's a way which... there's a way in which British people can... can contain... a lot of themselves... in one piece. Hmmm... And... that always surprises me. Because I always think: So, "Where is all that energy, where are all those thoughts and those feelings going. And if they not express through... gestures and facial expressions?" hmmm... so, that is terribly, terribly interesting and terribly useful. [...]	Non-verbal communication that means something important for therapeutic work. Using non-verbal communication. Her hesitations demonstrate here that she is trying to find the better words to express herself.
	258	How do you feel being a non-native English speaker working in London?	

Feeling powerful/ Feeling empowered	259-264	I feel very powerful (laughs). I feel powerful and I feel... hmmm... hmmm... satisfied but that's not a feeling. That's more a concept. I feel happy, I feel happy . It's a... it's a joyful experience. Hmmm... it's... it's... it's... hmmm... I experience myself as... someone who has worked really hard... to get to where I am . And... hmmm... has... I am the creation of something... that I... I've shaped in my life. I have... I... not in a million years I would have thought... that I was going to end up being a... a psychotherapist.	She hesitates a few times as if it is difficult to word her feelings and how she experiment them. She feels proud of being a non-native English speaker therapist working in London and being successful in doing what she does. It's more than she ever expected.
Regardless language	264-272	Hmmm...and... by being here and sitting in this chair... hmmm...I have incorporated and integrated everything I've done previously... to my training. Hmmm... and I fell very... very satisfied... with the fact that, it's all very possible. And I have worked really hard to get where I am. Hmmm... So... as... as an Italian therapist I think I am... extremely lucky . I feel very humble by the fact that... that... I'm... I am in... in a foreign country and people come... to seek me for help , for example, as a non... non-English person. Hmmm... because that also explains to me how this kind of work actually knows no boundaries at all. It's a very... it's a very powerful... statement actually.	She feels privileged for being a non-native English speaker working in English. She feels luck that people seek her help regardless her first language.
	273	This kind of work... what?	
Inexistent barrier	274-276	Being a therapist. So... when... when people are in need of some... some... support in their lives... it actually does not... doesn't mean very much that I'm Italian . I could be Siberian or	Her first language is not important for clients as long as she can speak a language good enough o understand them.

		Chinese... it doesn't really... that... the language is not... no longer a boundary.	
Relationship beyond language	276-280	Because I'm here as a human being , I'm here as someone who... has an... an interest in allowing people... to improve their life styles and to know how to... engage with themselves... in different ways, in ways that are more satisfying for them. And maybe they don't all of that, but I know that I provide that.	Human contact. Human relationship.
Another pair of glasses	280-283	And... hmmm... having... having this one foot in Italy, one foot in England, it's actually... it is empowering because I have that... I have a vision of both, of two different worlds... and of both worlds. And I incorporate that in my work. So, I know that I am very different from a lot of other therapists here, because of that.	Having the advantage of being able to see from two different points of view.
	284-285	You did say before that you think you have an accent. How does it impact on the work you do with native English speaking client?	
Language difficulties	287-292	Oh, sometimes I struggle. Sometimes I struggle, they struggle. It's not about the accent... I think. Hmmm... I think because I do ask these very odd questions about... how... how have they travelled internally from A to B? How have they succeeded... putting one thing on... aside and... engaging more with something that is more productive and more... hmmm...positive? So, it's more the nature of the questions that I ask. That is an issue for them.	It's not how she asks but what she asks. Client's difficulties in understanding the meaning and not the words she says.
	292-311	[...] [...]	

	312-313	So, with the work with native English speaking clients, you mentioned an accent. I'm just wondering how it influences the relationship and the process really.	
Language merged with culture	314-317	I don't think it does. Actually I don't think it does. Hmm... It's been maybe... only on two occasions that I had... all the clients, so older than me. So, I'm forty seven and they were all in their... sixty... hmm... late sixties... early seventies. And I think that was more of a cultural... hmm... difficulty, more than an accent.	More of a cultural issue than an issue with the language.
Practicing in a multicultural city	317-321	Hmmm...hmmm... and maybe a little bit of an accent. Because I think English is... in... in London we have so many different cultures that it's not... I'm amazed actually, and how English people don't actually... have any problems with... adjusting their ears to all this different accents they hear every day. They are amazing. So, I don't think it is a problem.	London is a very cosmopolitan city. English people are used to foreigners and to their accents.
English people are very tolerant			
	322	But you said that it is a struggle.	
	323	It is a... I think the struggle is for me and not for them.	
	324	Yeah. Can you say more about this struggle?	
The issue of not belonging	325-328	Hmmm... Well I will never be... an English person. That is what I assumed I would have become, after twenty... eight years of England. So, it's an assumption that I had to... battle with. That I could have become... a pure, you know...a pure... English speaker and like... and I'm not.	Feeling that she doesn't belong to the society, she doesn't belong there.

Practice makes it perfect	328-337	And I also have to say that if I had a partner whose language was English... perhaps my English would be a lot better. Hmm... because I have a very, very, very good ear... with languages. So... hmm... I... I... I know that... hmm... when I then... spend, for example, I go on retreats or... new trainings... hmm... and I leave home... and I spend time in the countryside somewhere in England and it's... they are all English. I come back home speaking much better English. Not in terms of grammar, that my grammar is fine, it's in terms of accent. Yeah. My husband is not English so... and not Italian. So we speak English as a foreign language but isn't... our home language.	If she was speaking English everyday with a native English speaker she believes her English would be much better.
	336-338	Can you just say a little bit more about your struggle? Because you were saying: "My struggle is that I feel I'm never going to be English. Can you say more about that? What is the struggle really?"	
It's about confidence	339-347	The struggle for me is going back to how perfectionist I am. That... hmm... I know exactly what I should sound like. I have a degree in English literature and I came for the love on the language... specifically. And...and perhaps I used to speak it with much less of any... of an accent in my early days, when I was doing my PhD in ***... hmm... because I was surrounded by academics and I was surrounded by native English speaking...speakers. And that... in that also I had rigidity me, so as a human being, I wasn't that accomplished as I... as I am	It's about how she sees herself and what she expected of herself. It's about her confidence.

		now. And now I say to myself: “I don’t mind having that... that little bit of an accent” but my perfectionist part... still would love to have more of that... precision with... hmmm... and accuracy with the pronunciation.	
The issue of not belonging	347-348	So, I... I... I always feel... I will always feel a foreigner because of that.	The eternal feeling of not belonging.
	349-350	And does the fact that you are in a room with native a British person or native English speaking that makes you more self-aware? Is that what you were saying?	
Self-awareness	351	Yeah, it does... Yeah.	Self-awareness regarding her accent.
	352	And that’s the struggle?	
	353	Yes... yes!	
	354-355	Ok, we touched a little bit on that but do you think there is any advantage or disadvantage of being a non-native English speaking practitioner working in London?	
Being able to work with other cultures	356-357	Hmmm... the advantages as I said before are many. Hmmm... hmmm... I can... I can... hmmm... I can work with... with... hmmm... other cultures.	Offering more languages and being able to work with people from different cultures.
Relating with the other	357-361	I understand... I have an understanding of what it means to... hmmm... seek help in a... in another language other than your own. So, I... I am more likely to... hmmm... so that you have little bit of lightness and... and... hmmm... humour about that... with non-native people... no... not... non-English speaking people.	Being able to put herself in the client’s shoes. Sameness.

British clients might prefer to have therapy with native English speakers	361-365	One disadvantage is that perhaps, native English people wouldn't choose me necessarily because I... I'm surrounded by... British here, British counsellors here. So, they would say... it can... it can... I don't know. It's... hmmm... I think it really depends on the... on the type of person. Some people have no issues with that at all. And maybe others do.	Client's might not chose her, might reject her because she is not a native English speaker.
Rejecting clients			
Assumptions	365-370	And I also know that if I said in my... in my... profile that I am... hmmm... that I come from... I think it's also something like a class... a class issue. That... hmmm... some people might... might not trust the fact that, I have as many qualifications and... as... you know, degrees and all of that... as... hmmm... a native English person. I mean these are all assumptions , I have no idea. Yeah, these are all my thoughts. Hmmm... (Long pause).	Her hesitations mean confusion in organizing her ideas. Clients might assume that she is not competent as British psychotherapists based on her background.
Clients not feeling understood	370-373	Other advantages or disadvantages might be... hmmm... that they might... that they might not feel... completely... hmmm... heard ... by me because... because I don't have an experience of... because I haven't been born... I wasn't born here.	Clients can feel not understood just because therapist is not native English speaker.
The presence of the difference			
Clients not feeling understood	373-374	So they might assume that I'm not able to really... hear then or understand them for who they are... coming from such a different background.	Clients might assume that she is not a good enough therapist.
The presence of the difference			
Judging her competence			

Exploring the differences	374-378	Hmmm... which of course is something that I would really much like to hear from the client, if that's the case because that's definitely a very good topic to talk about. Hmmm... and I will... So for example, I'm thinking about when I work, I also work at... at another practice in ***, where I have a lot of clients coming from... hmmm... the Caribbean or... Africa.	Clients from a different background, race and ethnicity.
The presence of the difference			
The presence of the difference	378-385	So... we are talking about a different race here... and I am very, very aware of the fact that... there is an elephant in the room. If I don't say, if I don't... actually speak and state... that there are differences ; there are race... our racial differences . Which I don't want to come in between the therapeutic work. So, I talk a lot about that. "So, what does that mean to you to have... to come to see ... a therapist that is a white... Italian person, when you are from the Caribbean?" If does that make... hmmm... Is that a problem for you? Is that an issue?" "Do you think you think that we could work together?"	She talks about racial differences here rather than specifically language differences.
	385-389	And I don't ask that question to an English person. Interestingly... which is maybe something that I could add to my 'blablabla' at the beginning of a contract. Hmmm... Just to see if that it is something that... hmmm... they can think about they're aware of... and if there's something that may have any... negative impact on... on the talk... on the work we do.	She only explores the differences with black clients. She reflects about the fact that she is of a different race than a British client.

	390	Why do you think you don't ask them?	
	391-394	Because I don't... because I left Italy such a long, long time ago. That I... I forget...that... that it could be an issue. Whereas... the white and black or the white and orange or the white and green is very obvious. Yeah... it's a very interest... very good question. Yeah. So maybe that's something I should ask actually. Yeah.	Cultural issues rather than evident language issues.
	395-397	Anything you can add when you think about language in the therapeutic room with the client, the language you speak and how important it is? Anything you can add to the subject that you haven't spoken about or any example that you might think it's relevant for the subject?	
	398-399	[...] [...]	
Switching languages	400-403	Hmmm... (long pause) hmmm... Ok. I can talk about the... the effort. There is an effort I... put in place... when I speak, So... the effort is when I switch from an English client to an Italian client , to an Italian client to an English client, if I do this kind of dance... or if I spend one morning speaking in Italian and then an afternoon speaking in English...	Quickly going from speaking one language to another.
From one language to another	403-405	I have moments of... hmmm... it's a big word to say blockages but it's... it feels like that a little bit. Where I think like: "Oh! My God! What is that word?"	Sometimes she can't find a word in a certain language and she feels as if she gets stuck.
Stuck in the room			
Looking for words			
Representing who we are	405-407	Or... hmmm... I think it... I go back to the fact that I am a	The language defines who she is. She is a

		person when I'm speaking English and I am a different person when I'm speaking Italian.	different person in different languages.
Switching languages	407-410	And then so, it is like... as I maybe, mentioned before, a bit of a performance. I am a bit of a performer in that... because I need to then jump from one place to the other . And sometimes it is very swift, because as I say is maybe one hour in Italian, one hour in English . Hmm... And that can be... that is effortful for me.	She talks with a very firm and confident tone of voice. The effort of switching languages.
	410-415	Hmmm... So, for example... I'm giving you an example. I'm sitting here with an Italian client and the buzzard goes on, and it is an English person. Even just that, I have to be very fast ... often it's completely automatic but it's interesting to think that I am able to do. It's... it... I mean, it's fascinating... how that works... and that maybe without having so much over... an awareness on the moment... because I just do it. Now that I'm thinking about it, then it is an effort .	The effort of jumping form one language to another.
Switching languages	415-417	That is... I'm having an extra... an extra gear in me ... that allows me to go from one place to the other so... so swiftly. So... hmm... so that is an advantage .	Having a plus. Ability to switch form one language to another.
Free from assumptions	417-425	And I remember in the first days of my... of working like this that... that was something like: "Ok, if I start odd, if I speak all odd, if I have an English client, even more so actually.. and then, they don't... they don't know where I come from ". If they haven't looked at my profile on the website and they had just a	Clients might not know where she comes from.

		<p>referral of somebody else... and they do not know what my nationality is... hmmm... and then they... the buzzard goes... and I speak Italian. Because I know that my next client is Italian. It is very interesting what that is they think about and they never ask me the question: "Oh, are you Italian then? So, this is definitely... this is definitely because an area that I can... hmmm... explore more with my English... clients.</p>	
	426-427	<p>What did you think when you heard about my subject, what were the first things that came up for you in terms of the subject really?</p>	
The odd one out	428-435	<p>I said yes because I was very interested. I wouldn't have said yes, because I'm so busy (laughs), if I hadn't liked the idea. So, I... I thought very high of your research and I... I said: "Yes, finally somebody who has quote this... this topic, this... this subject"... this topic more than subject. And I thought... hmmm... sitting here, I wasn't aware that this was going to be very much like an interview in this way. For me it was more like: "Oh, I'll have an opportunity to talk about what are the findings about languages and... in the psychotherapeutic world. Hmmm... And I was very interested because as I... I go back to work in *** where I am definitely... a minority, I am a white minority in ***.</p>	<p>Being minority in a foreign country. Working in a place where she feels different, she represents the minority.</p>

The odd one out	435-442	Hmmm... And that's something I am very passionate about. What does that feel like? What does that mean? Hmmm... And being the white person, I'm always...sort of... I'm not... I'm part of the minority, but because I am foreigner I became a minority ... being white. I'm very, very empathetic in sitting on the chair... of being in a place, in a position of... the person that comes from a minority. And that's...yeah. So, when you asked... when I read that I thought: "Yeah, that will make me think more... more... deeply in what it means to be that minority in a foreign country".	Being part of the minority for being a foreigner.
The presence of the difference			
	443	And what do you think about that now?	
It's about confidence	444-445	I think it is very much to do with... hmmm... hmmm... the level of self-awareness and self-development.	The impact of being a non-native English speaker working in London depends on therapist's confidence and self-awareness.
It's about confidence	445-448	So, I think it can be a hindrance if you are... if you don't know yourself well enough to be comfortable with your limitations . It can be a huge hindrance actually. It can be an excuse also for not... persevering... and being responsible and... wanting to... hmmm... hmmm... wanting to explore more life... being more adventurous and taking risks.	Being comfortable with your own limitations.
	448-451	But... and... if you have done all that work, then it's extremely... it's not an issue at all. So then...It's... it's the one way which someone can... make the difference between being a minority or not.	It is how one feels about being different. It's about one's confidence again.

It's about confidence	451-456	It's all... it's all... we have in... it is what we have in our head... that actually would shape us as, or... "I'm feeling less than others" or "I am not as important as... others." Yeah. Hmmm... and... I think I'll always want, I'll always prefer being... on the edge of things because that gives me the right perspective. I can observe a lot from the... from the... outskirts of things. So, I thought that I: "Oh, poor me, I don't belong anywhere" or "I'm always going to be a foreigner and I will not be part of... like all the rest of them".	The 'I'm not good enough' feeling.
Sensitive to differences	456-458	But actually I think it is a fantastic place to be in... because I'm also very sensitive to others . Do I... do I... make myself understood?	For being a foreigner she is more sensitive to other people, to other minority groups.
	459-462	Yes, you did! I'm just thinking about this. Because it's interesting. Because you work with the three mainly... three different kinds of groups: the native English speaking, the non-native English speaking and the Italian speakers, which is your first language. If you could just summarize the differences of the work you do with these three groups what would you say?	
More comfortable in a mother tongue	463-465	When I work with Italians... (long pause)... When I work with an Italian I have... I feel that I am doing... many jobs at once. If they seek me is because they are... they feel more at ease with being with... hmmm... another Italian person.	Clients feel more comfortable having therapy in their first language.
Assumptions	465-468	That means that I... they assume that I know... their background, their cultural background, their... you know... their spiritual	Clients assume they are similar to therapist. They assume therapist knows all about them

		believes... coming from a Catholic country... hmmm... the sort of understand of how a family works in functions in a country like Italy... yeah.	and about who they are.
Relating with the client	468-474	So, all that dynamics and... and... and all that relationship challenges within their families... hmmm... I understand and empathize a lot. Hmmm... and I can talk about my personal experience: Why have I come to this country? Why have I made London my home? Because of a situation I had in Italy within my family. So that is something that I feel extremely powerful about because I have my own... I have my own personal experience about that. And I can really empathize with the way they are.	She empathizes with clients because they share similar experiences.
	475	So, that is something about understanding them better?	
More comfortable in a mother tongue	476-478	Yes. And also, they feel understood. So, it not just about me knowing... but it's also them understanding... them feeling held... them feeling a lot... very held by knowledge and my experience... of me being an Italian.	Clients feeling understood and held by the therapist who shares the same language.
Relating with the client	478-498	[...] So, because I am an Italian I can really see the whole journey. Yeah.	She shares the same cultural background.
	499-502	Do you think it would be different if you were working in countryside not in London where you would pretty much only have British clients. Do you think it would be... The way you feel, because it sounds to me that you feel very passionate and proud of being Italian in the London context. Do you think it would be different if you were in	

		countryside?	
The presence of the difference	503-509	I think it would... definitely . I think it would. I think I would... and... and... knowing me, I would... continue being very passionate about that. So that... I would be much more of a... hmmm... I would perhaps have to maintain a much stronger bond to who I am in order to survive in that comas, living in an environment of countryside, English countryside. Because I know I would be really maybe more of an exotic flower there . Then... then... I don't know if there I could be so successful... actually in the middle of English countryside, I'm not quite sure about that.	She speaks slower and sounds very reflective. Practicing in a smaller city would be different. She would feel more different.
	510-511	So, you said 'an exotic flower', which is a very interesting metaphor. Do you feel like one here?	
The presence of the difference	512-520	(Long pause) I do. I do. Maybe not such exotic but... I'm different, I'm definitely different and... hmmm... I like that very much. [...]So... yeah, I'm different, I am... (laughs) I am very different . Yeah.	She feels different being non-native English speaker living in London.
	521-522	Is there anything else you haven't talked about that you feel it is relevant and you want to add?	
	523-538	[...] [...]	
	539-543	I can tell you that I put up my profile and said that I offer... therapy in two languages, not in a million years I thought that I was going to have any Italian client. To me... hmmm... until I did have some Italian... the first Italian client, I really assumed that I was going to be... this foreigner here...	She was actually surprised that she found many Italian clients in the end.

		<p>but only doing counselling in English for English people. I had no idea that actually being in *** London, there aren't many Italians psychotherapists.</p>	
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Appendix 7: Theme Table Participant 10

Themes:	Line:	Key Words:
<i>Feeling comfortable and confident speaking a language</i>		
<i>Speaking English</i>	39-40, 144	“when I speak English I can fluently express myself” (39-40)
<i>Second language as a first</i>	39-40, 43	“when I speak English I can fluently express myself rather than in my own native language” (39-40)
<i>Therapeutic fluency</i>	41-42	“talk about the critical self... you know... all kind of things that I do, I don’t know it in Italian” (41-42)
<i>Training as a therapist in English</i>	37-39, 145-146	“I’ve trained here so, everything that I know as a psychotherapist... all the technical terms, the labelling... you know...everything I have recorded in English” (37-39)
<i>It’s home</i>	224	“that is the nearest to home that we can get” (224)
<i>Confidence comes with time</i>	197-198	“I don’t give myself a hard time. Hmmm... I used to when I began” (197-198)
<i>It’s about confidence</i>	199, 213-214, 339, 444-445, 446, 451	“for me is how perfectionist I am” (199)
<i>More comfortable in a mother tongue</i>	221-222, 464-465, 476	“It’s important to me to speak my own language when I do therapy” (221-222)
<i>The good enough language</i>	217	“I know my limitations” (217)
<i>Practice makes it perfect</i>	328-329	“I had a partner whose language was English... perhaps my English would be a lot better” (328-329)
<i>Between languages</i>		

<i>Relationship beyond language/ Regardless language</i>	269, 276-277	“I am in... in a foreign country and people come... to seek me” (269)
<i>Slower pace for the session</i>	159, 172	“I would like it to be... to flow. I would like the Italian to flow more” (159)
<i>Switching languages</i>	147, 401-402, 408-409	“I will use... English when I... miss or lack... that word in Italian” (147)
<i>Connecting language with the moment</i>	110, 111	“When I speak English I’m definitely... the mature... more adult self” (110)
<i>Representing who we are</i>	225, 227-228, 234, 235-236, 406-407	“language... forms who we are” (225)
<i>The emotional connection of the language</i>	55, 125, 224	“language that enables me to get close to them” (55)
<i>Creating emotional distance or closeness with language</i>	126-127	“less of a professional distance” (126-127)
<i>Language as a hiding place</i>	63-64	“a hindrance to someone getting more grounded or more embodied in their feelings” (63-64)
<i>Different perception of self</i>	106-107, 114-115	“I perceive myself in a different way when I am speaking Italian than I am speaking English” (106-107)
<i>Inexistent barrier</i>	276	“the language is not... no longer a boundary” (276)
<i>The issue of not belonging</i>	327-328, 347-348	“I could have become... a pure, you know... a pure... English speaker and like... and I’m not” (327-328)
<i>Understanding</i>		
<i>Prime tool, vehicle of communication</i>	46	“the main tool I have” (46)
<i>Clarifying doubts</i>	193-194	“if they don’t understand you, they would say [...] “What do you mean by that?” ” (193-194)
<i>Different meanings/ Nuances of the language</i>	76	“it’s not about the language, it’s about what I mean” (76)

<i>Unprofessionalism/ Competence</i>	156, 181, 373-374	“because I am lacking that word. I feel lessened” (156)
<i>Clients feeling not understood</i>	371, 373	“they might not feel... completely... hmmm... heard” (371)
<i>Choosing the right words</i>	130-131, 138-139	“if you feel more... comfortable with me using ‘tu’, I’ll do that” (138-139)
<i>Stuck in the room</i>	404	“it’s a big word to say blockages but it’s... it feels like that” (404)
<i>Lack of understanding</i>	160, 197, 286	“I thought about maybe coming with a glossary of the words” (160)
<i>Limitations caused by lack of fluency</i>	151, 156, 172, 286	“I don’t like it... because it interrupts my flow” (151)
<i>Being honest and authentic/ From a humble position</i>	182-183, 200-201, 216-217	“I explain it at the beginning of my contract that this is one... one of the difficulties I have” (182-183)
<i>It’s essential to be fluent</i>	47-48	“better I express myself the clearer is the work for the client. Hmmm... so language is... essential” (47-48)
<i>Meaning behind the words</i>	125, 130-131	“the more formal ‘lei’... hmmm... they are much more in... they’re taking themselves more seriously” (130-131)
<i>More than words</i>		
<i>Non-verbal</i>	51-52, 248	“non- verbal expressions. So a lot of body work” (51-52)
<i>Different ingredients</i>	230	“the musicality of the language” (230)
<i>Context</i>	76, 290	“it’s not about the language, it’s about what I mean” (76)
<i>Having a plus</i>		
<i>Having more cards to play</i>	62, 86, 100, 356-357	“that is my advantage being an Italian therapist” (62)

<i>Perception of nuances/ Another pair of glasses</i>	244, 281-282	“I think I have another pair of glasses” (244)
<i>Sensitive to differences</i>	245-246, 457	“I see it as being more intuitive and more sensitive to... differences” (245-246)
<i>Being an inspiration</i>	91	“they want to become therapists just inspired by the fact that I am a foreigner, I did” (91)
<i>Feeling powerful</i>	259	“I feel very powerful (laughs). I feel powerful” (259)
Translation		
<i>Untranslatable</i>	120, 162	“that in English does not exist” (120)
Cultural link		
<i>Practicing in a multicultural city</i>	318	“in London we have so many different cultures” (318)
<i>Language merged with culture</i>	316-317	“that was more of a cultural... hmmm... difficulty, more than an accent” (316-317)
Accent		
<i>Self-consciousness/ Self-awareness</i>	88, 351	“I speak very good English but I have an accent” (88)
<i>Assumptions</i>	367-368, 369, 465-466	“some people might... might not trust the fact that, I have as many qualifications” (367-368)
<i>Rejecting client</i>	361-362	“native English people wouldn’t choose me” (361-362)
Sameness		
<i>Relating with the other</i>	179, 188, 276-277, 357-358, 473-474, 498	“I am as human as you are” (179)
<i>The presence of the difference</i>	372, 374, 378, 379, 380, 381, 392-393, 507, 512	“I would be really maybe more of an exotic flower there” (507)
<i>Assuming you know</i>	465-466	“they assume that I know... their background,

		their cultural background” (465-466)
<i>Free from assumptions/ Anonymity</i>	419-420	“they don’t know where I come from” (419-420)
<i>Speaking the same language</i>	276-277	“I’m here as a human being” (276-277)
<i>Not knowing as an opportunity to know more</i>	70-71	“I get more information because of the fact that they don’t understand me” (70-71)
<i>The odd one out</i>	435, 438	“because I am foreigner I became a minority” (438)

Appendix 8: Table of Identifying Recurrent Themes

Emergent Themes	Anne	Bia	Kelly	Katerina	Rif	Gersende	Sylvia	Marianne	Ayda	Giulia	Present in over half sample?
Feeling comfortable and confident speaking a language											
<i>Speaking English</i>	YES	YES	NO	YES	NO	YES	NO	YES	YES	YES	YES
<i>Second language as a first</i>	YES	YES	NO	NO	NO	YES	YES	YES	YES	YES	YES
<i>Therapeutic fluency</i>	NO	NO	YES	NO	NO	NO	YES	YES	YES	YES	NO
<i>Training as a therapist in English</i>	YES	YES	NO	NO	YES	YES	YES	YES	YES	YES	YES
<i>It's home</i>	NO	YES	NO	NO	NO	YES	YES	NO	NO	YES	NO
<i>Confidence comes with time</i>	NO	NO	YES	YES	NO	NO	NO	NO	YES	YES	NO
<i>It's about confidence</i>	YES	YES	YES	YES	NO	YES	NO	YES	YES	YES	YES
<i>The internal language</i>	NO	NO	YES	NO	NO	NO	NO	NO	NO	NO	NO
<i>More comfortable in a mother tongue</i>	NO	NO	YES	YES	YES	YES	NO	YES	YES	YES	YES
<i>Eternally a second language</i>	NO	NO	NO	YES	NO	NO	NO	NO	NO	NO	NO
<i>English as an official language</i>	NO	NO	NO	NO	NO	NO	YES	NO	NO	NO	NO

<i>Gaps in a language</i>	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO	NO
<i>The good enough language</i>	NO	NO	NO	YES	NO	NO	NO	YES	NO	YES	NO
<i>Less pressure in public sector</i>	NO	NO	NO	NO	NO	NO	NO	YES	NO	NO	NO
<i>Better than nothing</i>	NO	NO	NO	NO	NO	NO	NO	YES	NO	NO	NO
<i>Practice makes it perfect</i>	NO	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO
<i>Between languages</i>											
<i>Relationship beyond language/ Regardless language</i>	YES	YES	YES	YES	NO	YES	NO	NO	NO	YES	YES
<i>Slower pace for the Session</i>	NO	NO	NO	YES	NO	YES	NO	NO	YES	YES	NO
<i>Therapist slowing down shows interest</i>	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO	NO
<i>Different flow in the session</i>	NO	NO	NO	YES	NO	NO	NO	NO	NO	NO	NO
<i>Switching languages</i>	YES	YES	NO	YES	NO	YES	YES	NO	YES	YES	YES
<i>Broader vocabulary</i>	YES	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO
<i>Therapeutic terms</i>	YES	YES	NO	NO	NO	NO	NO	NO	NO	NO	NO
<i>Connecting language with the moment</i>	NO	YES	NO	NO	NO	YES	YES	NO	YES	YES	NO
<i>Therapy in a first language</i>	NO	YES	NO	YES	NO	NO	NO	NO	NO	NO	NO

<i>Speaking with focus</i>	NO	NO	YES	YES	NO	NO	NO	NO	NO	NO	NO
<i>Quicker connection in a mother tongue</i>	NO	NO	NO	YES	YES	YES	NO	YES	NO	NO	NO
<i>Representing who we are</i>	NO	NO	NO	YES	NO	NO	NO	NO	NO	YES	NO
<i>More valuable in a mother tongue</i>	NO	NO	NO	NO	NO	NO	YES	NO	NO	NO	NO
<i>The neutrality speaking English</i>	NO	NO	NO	NO	NO	NO	YES	NO	NO	NO	NO
<i>The emotional connection of the language</i>	NO	NO	NO	NO	NO	NO	NO	YES	YES	YES	NO
<i>Creating emotional distance or closeness with language</i>	NO	YES	NO	NO	NO	YES	YES	YES	YES	YES	YES
<i>From one language to another</i>	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO	NO
<i>The language of the relationship</i>	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO	NO
<i>Better flow depending on the relationship</i>	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO	NO
<i>Free to choose</i>	NO	NO	NO	NO	NO	YES	NO	NO	YES	NO	NO
<i>Importance of language depends on the</i>	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO	NO

<i>approach</i>											
<i>Language as a hiding place</i>	NO	NO	NO	NO	NO	NO	NO	YES	NO	YES	NO
<i>Being more creative in a first language</i>	NO	NO	NO	NO	NO	NO	NO	YES	NO	NO	NO
<i>More you say, more you feel</i>	NO	NO	NO	NO	NO	NO	NO	YES	NO	NO	NO
<i>Connecting written notes with language spoken</i>	NO	NO	NO	NO	NO	YES	NO	NO	NO	NO	NO
<i>Different perception of self</i>	NO	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO
<i>Inexistent barrier</i>	NO	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO
<i>The issue of not belonging</i>	NO	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO
Understanding											
<i>Native speakers are very tolerant</i>	NO	NO	YES	NO	NO	NO	YES	NO	NO	NO	NO
<i>Prime tool, vehicle of communication</i>	NO	YES	NO	YES	YES	YES	NO	NO	YES	YES	YES
<i>Clarifying doubts</i>	YES	YES	YES	YES	YES	NO	NO	NO	NO	YES	YES
<i>Feeling dumb</i>	YES	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO
<i>Different meanings/ Nuances of the language</i>	NO	YES	NO	YES	YES	YES	NO	YES	YES	YES	YES
<i>Unprofessionalism /</i>	YES	YES	NO	NO	NO	YES	NO	YES	YES	YES	YES

<i>Competence</i>											
<i>Clients feeling not understood</i>	YES	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO
<i>Depends on the level</i>	YES	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO
<i>Making mistakes</i>	YES	NO	NO	YES	NO	NO	NO	YES	NO	NO	NO
<i>Understanding or Speaking</i>	YES	NO	NO	YES	NO	NO	NO	NO	NO	NO	NO
<i>Choosing the right words</i>	NO	YES	YES	YES	YES	YES	NO	YES	NO	YES	YES
<i>More aware of meanings</i>	NO	NO	YES	NO	NO	NO	NO	NO	NO	NO	NO
<i>Stuck in the room</i>	NO	NO	NO	YES	NO	NO	NO	NO	NO	YES	NO
<i>Lack of understanding</i>	NO	NO	NO	NO	YES	NO	NO	NO	NO	YES	NO
<i>Overcoming barriers</i>	NO	NO	NO	NO	YES	NO	NO	NO	NO	NO	NO
<i>It's ok not to be fluent</i>	NO	NO	NO	NO	YES	NO	NO	YES	NO	NO	NO
<i>Limitations caused by lack of fluency</i>	NO	NO	NO	NO	YES	YES	NO	NO	NO	YES	NO
<i>Being honest and authentic/ From a humble position</i>	NO	NO	NO	NO	YES	NO	NO	YES	NO	YES	NO
<i>Universal understanding</i>	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO	NO
<i>No need for an understanding</i>	NO	NO	NO	NO	NO	NO	NO	YES	NO	NO	NO

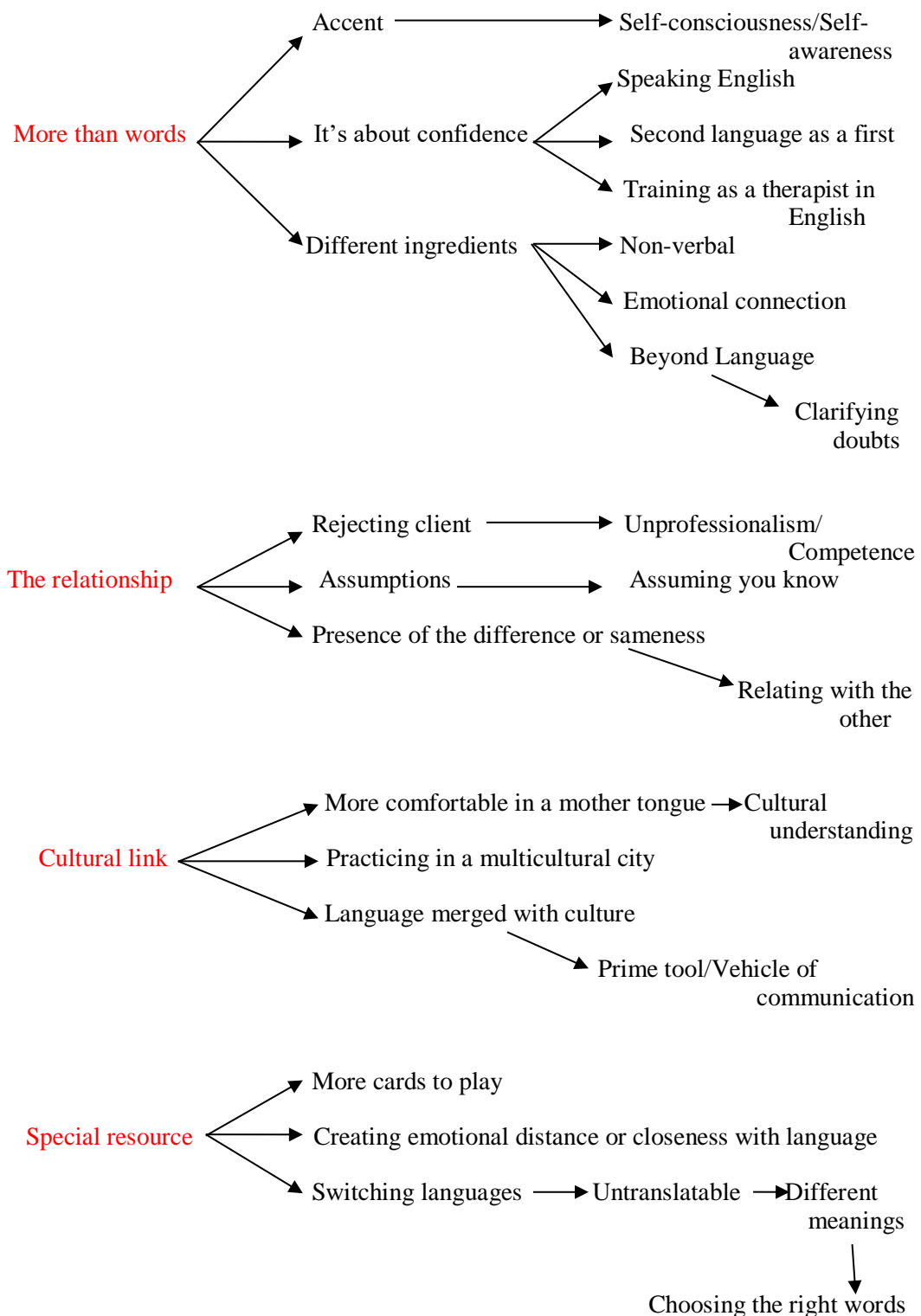
<i>Getting it right/ Saying it right</i>	NO	NO	NO	NO	NO	YES	NO	YES	NO	NO	NO
<i>It's essential to be fluent</i>	NO	NO	NO	NO	NO	YES	NO	NO	NO	YES	NO
<i>Self-doubts</i>	NO	NO	NO	NO	NO	YES	NO	NO	NO	NO	NO
<i>Dealing with differences</i>	NO	NO	NO	NO	NO	YES	NO	NO	NO	NO	NO
<i>Meaning behind the words</i>	NO	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO
<i>More than words</i>											
<i>Non-verbal</i>	YES	YES	YES	YES	YES	YES	NO	YES	YES	YES	YES
<i>Different ingredients</i>	NO	YES	YES	YES	YES	YES	NO	YES	YES	YES	YES
<i>Emotional connection</i>	NO	YES	YES	YES	YES	NO	NO	YES	YES	NO	YES
<i>How not what</i>	NO	YES	NO	NO	NO	NO	NO	NO	YES	NO	NO
<i>Context</i>	YES	YES	YES	NO	NO	NO	NO	NO	NO	YES	NO
<i>The language of silence</i>	YES	YES	NO	NO	NO	NO	NO	NO	YES	NO	NO
<i>The new world</i>	NO	YES	NO	NO	NO	NO	NO	NO	NO	NO	NO
<i>Language adjuncts</i>	NO	NO	NO	YES	NO	NO	NO	NO	NO	NO	NO
<i>The unsaid</i>	YES	YES	NO	NO	NO	YES	NO	NO	NO	NO	NO
<i>Having a plus</i>											
<i>Having more cards to play</i>	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
<i>Perception of nuances/ Another</i>	YES	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO

<i>pair of glasses</i>											
<i>Free of labels</i>	NO	YES	NO	NO	NO	NO	NO	NO	NO	NO	NO
<i>Sensitive to differences</i>	NO	NO	YES	NO	NO	NO	YES	NO	NO	YES	NO
<i>Clients that cannot speak English</i>	NO	NO	NO	NO	YES	NO	NO	NO	NO	NO	NO
<i>More job opportunities</i>	NO	NO	NO	NO	YES	NO	NO	NO	NO	NO	NO
<i>Broader life experience</i>	NO	NO	NO	NO	NO	YES	NO	NO	NO	NO	NO
<i>Being an inspiration</i>	NO	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO
<i>Feeling powerful</i>	NO	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO
Translation											
<i>Untranslatable</i>	NO	NO	NO	YES	YES	YES	YES	NO	YES	YES	YES
<i>Automatic thought/fluency</i>	YES	NO	YES	NO	NO	YES	YES	YES	NO	NO	NO
<i>Lack of fluency</i>	YES	NO	YES	NO	NO	YES	NO	NO	YES	NO	NO
Cultural link											
<i>Cultural understanding</i>	YES	NO	YES	YES	YES	YES	NO	YES	YES	NO	YES
<i>Practicing in a multicultural city</i>	NO	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
<i>Cultural differences in language</i>	NO	NO	NO	YES	YES	NO	NO	NO	YES	NO	NO
<i>Language merged with</i>	YES	NO	NO	YES	YES	YES	YES	NO	YES	YES	YES

<i>culture</i>											
Accent											
<i>Self-consciousness/ Self-awareness</i>	YES	YES	YES	YES	NO	YES	NO	YES	YES	YES	YES
<i>Assumptions</i>	YES	YES	YES	YES	NO	NO	NO	YES	YES	YES	YES
<i>Speaking through the glass</i>	YES	NO	YES	NO	NO	NO	NO	NO	NO	NO	NO
<i>Social class link</i>	NO	YES	NO	NO	NO	NO	NO	NO	NO	NO	NO
<i>Rejecting client</i>	NO	YES	YES	YES	YES	YES	NO	YES	NO	YES	YES
<i>Being more present</i>	NO	NO	YES	NO	NO	NO	NO	NO	NO	NO	NO
<i>Variations depending on clients' issues</i>	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO	NO
<i>Smaller clientele</i>	NO	NO	NO	NO	NO	NO	NO	YES	NO	NO	NO
Sameness											
<i>Relating with the other</i>	YES	YES	YES	YES	YES	YES	YES	YES	NO	YES	YES
<i>The presence of the difference</i>	YES	YES	YES	YES	YES	NO	YES	YES	YES	YES	YES
<i>Assuming you know</i>	YES	YES	NO	NO	YES	NO	NO	YES	YES	YES	YES
<i>Free from assumptions/ Anonymity</i>	NO	YES	NO	NO	NO	NO	YES	YES	YES	YES	NO
<i>Speaking the same language</i>	YES	NO	NO	YES	YES	YES	NO	NO	NO	YES	NO
<i>Not knowing as an opportunity to</i>	NO	NO	NO	NO	NO	NO	NO	YES	NO	YES	NO

<i>know more</i>											
<i>The odd one out</i>	NO	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO

Appendix 9: Graphic of Combining the Themes



Appendix 10: Table of Master Themes and Contributing Participants

Master Theme	Participants contributing	Sub- themes	Participants Contributing
More than words	All	IV- Accent V- It's about confidence VI- Different ingredients	8 (except Rif and Sylvia) All 9 (except Sylvia)
The relationship	All	IV- Rejecting client V- Assumptions VI- Presence of the difference or sameness	9 (except Sylvia) 8 (except Gersende and Sylvia) All
Cultural link	All	IV- More comfortable in a mother tongue V- Practicing in a multicultural city VI- Language merged with culture	8 (except Bia and Sylvia) 9 (except Anne) 8 (except Kelly and Mariane)
Special resource	All	IV- More cards to play V- Creating emotional distance or closeness VI- Switching language	All 6 (except Anne, Kelly, Katerina and Rif) All